



San Diego County Sheriff's Department Crime/Incident Report

Case No. **17147578**CAD Event No.: **E4421100**Case Disposition: **Active**Primary Victim: **State of California**Report No. **17147578.1****1**
Page 1 of 3**GENERAL CASE INFORMATION**

Primary Charge: 981153 - ZZ - MISCELLANEOUS REPORTS - 153			
Special Studies:		Related Cases:	
Location, City, State, ZIP: 451 Riverview Pkwy, Santee, CA 92071		Occurred On: 09/11/2017 15:00:00 (Monday)	
Jurisdiction:	Beat: 024	Call Source: DEPUTY	(and Between):
Means:		Motives:	

VICTIM/S**IBR/UCR OFFENSE/S**

Offense Description: 981153 - ZZ - MISCELLANEOUS REPORTS - 153		Level: O	Against:	Completed? Yes	Counts	Using:
Location Type: 15 - Jail/Prison		Hate/Bias: 88 - None (No Bias)		Domestic Violence: No		
Criminal Activity:	Type Security:	Gang Related:	Entry:	Point of Entry:		
Weapons/Force:	Tools:		Targets:			

ARRESTEE/S**SUSPECT/S (Not Yet Arrested)****Suspect #1**

Name: Burrell, Kandriqua	County Residence: N - Nonresident	Interpreter Language:
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Name Type: Alias/AKA										First: Kavricia		Middle:		Last: McKoy		Suffix:	
Name Type: Alias/AKA										First: Kalani		Middle:		Last: Williams		Suffix:	
Home Address, City, State, ZIP:						Res. Country:		Place of Birth: California		Undocumented:							
Race: B	Sex: F	Date of Birth / Age: (b)(5)(A) - 19		Height: 5' 6"	Weight: 130	Hair Color: BLK	Eye Color: BRO	Facial Hair: 12 - None/Fuzz		Complexion:							
Hair Style:		Hair Length:		Build:		Teeth:		Suspected User:									
Employment Status: U - Unemployed		Occupation/Grade:		Employer/School:		Employer Address, City, State, ZIP:											
Type:										CONTACT INFORMATION:		Number/Address:					

Reporting Officer SH2691 - CAZAREZ, RAMON	Division / Organization Las Colinas Detention and Re-Entry Facility	Reviewed By SH0707 - GONZALES, CECILIA
Report Date 9/12/2017 9:25:44 AM	Detective Assigned	Reviewed Date 09/16/2017 14:30:01



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IDENTIFICATION:			
Type: DLN - Drivers License Number	Number: (b)(5)(A)	State:	Country:
Type: FBI - FBI No.	Number: (b)(5)(A)	State:	Country:
Type: CII - CII Number	Number: (b)(5)(A)	State:	Country:
Type: BN - Booking Number	Number: (b)(5)(A)	State:	Country:

SCARS, MARKS, TATTOOS, ODDITIES:	
Attire: Jail Issued Greens	Suspect Actions:

WITNESSES

OTHER ENTITIES

PROPERTY

Property Item #1.000 - DVD Containing Video from Handheld Camera

Derivative No.: 0	Property Category: 1311 - Recording - Interview or Case related - Video/Photo CD, DVD, Tape, Film, Digital storage, Negative		
Status: ES - Evidence (Seized)	Count: 1	Value:	
Manufacturer:	Model:		
Serial No.:	Model Year:	OAN:	
Color:	Caliber:		
Body Style:	Recovered/ Seized Date: 09/11/2017		
Owner:	Disposition: LCDRF Evidence Locker #20		
Evidence Tag:	Alert(s):		
Drug Type:	Drug Quantity:		
Search Warrant:			
Notes:			

Property Item #2.000 - DVD Containing Video from Handheld Camera

Derivative No.: 0	Property Category: 1311 - Recording - Interview or Case related - Video/Photo CD, DVD, Tape, Film, Digital storage, Negative		
Status: ES - Evidence (Seized)	Count: 1	Value:	
Manufacturer:	Model:		
Serial No.:	Model Year:	OAN:	
Color:	Caliber:		
Body Style:	Recovered/ Seized Date: 09/11/2017		
Owner:	Disposition: LCDRF Evidence Locker #20		
Evidence Tag:	Alert(s):		
Drug Type:	Drug Quantity:		
Search Warrant:			
Notes:			

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Property Item #3.000 - DVD Containing Facility Video

Derivative No.: 0	Property Category: 1311 - Recording - Interview or Case related - Video/Photo CD, DVD, Tape, Film, Digital storage, Negative	
Status: ES - Evidence (Seized)	Count: 1	Value:
Manufacturer:	Model:	
Serial No.:	Model Year:	OAN:
Color:	Caliber:	
Body Style:	Recovered/ Seized Date: 09/11/2017	
Owner:	Disposition: LCDRF Evidence Locker #20	
Evidence Tag:	Alert(s):	
Drug Type:	Drug Quantity:	
Search Warrant:		
Notes:		

Property Item #4.000 - CD Containing 4 Digital Photos

Derivative No.: 0	Property Category: 1311 - Recording - Interview or Case related - Video/Photo CD, DVD, Tape, Film, Digital storage, Negative	
Status: ES - Evidence (Seized)	Count: 1	Value:
Manufacturer:	Model:	
Serial No.:	Model Year:	OAN:
Color:	Caliber:	
Body Style:	Recovered/ Seized Date: 09/11/2017	
Owner:	Disposition: LCDRF Evidence Locker #20	
Evidence Tag:	Alert(s):	
Drug Type:	Drug Quantity:	
Search Warrant:		
Notes:		

REPORT NARRATIVE

See Officer Report, Deputy Cazarez #2691 for more information.

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GENERAL CASE INFORMATION

Special Studies:		Related Cases:	
Location, City, State, ZIP: Psu, Santee, CA 92071		Occurred On: 9/11/2017 3:50:00 PM (Monday)	
Jurisdiction: DETENTION FACILITY - LAS COLINAS WOMENS	Beat: 024	Call Source:	(and Between):

INDIVIDUAL/S

Name: Burrell, Kandrigua				Person Code:		Interpreter Language:		
ALIAS / AKA / NICKNAME / MONIKER:								
Name Type: Alias/AKA	First: Kavricia	Middle:	Last: McKoy	Suffix:				
Name Type: Alias/AKA	First: Kalani	Middle:	Last: Williams	Suffix:				
Home Address, City, State, ZIP:		Res. Country:		County Residence:		Undocumented:		
Race: B	Sex: F	Date of Birth / Age: (b)(5)(A) - 19	Height: 5' 6"	Weight: 130 lbs	Hair Color: BLK	Eye Color: BRO	Facial Hair: 12 - None/Fuzz	Complexion: DBR - Dark Brown
Employment Status: U - Unemployed		Occupation/Grade:	Employer/School:		Employer Address, City, State, ZIP:			

**CONTACT INFORMATION
IDENTIFICATION:**

Type: BN - Booking Number	Number: 17116878	State:	Country:		
Type: JIM - JIMS Number	Number: (b)(5)(C)	State:	Country:		
Type: CII - CII Number	Number: (b)(5)(C)	State:	Country:		
Type: DLN - Drivers License Number	Number: (b)(5)(A)	State: CA - California	Country:		
Attire: Jail Issued Greens		Injury: Yes	Extent Of Treatment: 3 - Treated at Hospital	Violent Crime Circumstances:	
Subject Injury Description:					
Officer Injury Description:					

REPORT NARRATIVE**ORIGIN:**

On 09/11/2017, at approximately 1500 hours, I was assigned as a House 4B Deputy at the Las Colinas Detention and Re-Entry Facility (LCDRF). While conducting a security check, I received a radio transmission instructing me to respond to the Tactical Response Room (Tac Room). I responded to the Tac Room.

DEPUTY'S OBSERVATIONS AND ACTIONS:

At approximately 1448 hours, Inmate Kandrigua Burrell **(b)(5)(A)** was returned to her cell, Psychiatric Security Unit (PSU) number 22, once her dayroom was complete. Due to Burrell's assaultive history she must wear leg and waist chains while she is out for dayroom. Burrell refused to let the deputies remove the waist chains through the food port, so she was secured in her cell. While in her cell, Burrell slipped the waist chains from around her waist by pushing them down and stepping out of them. Burrell began swinging the chains around in her cell and striking the cell door. The PSU housing deputies, Sgt. Hisquierdo (4644) and Lt Gonzales (0707) were unable to convince Burrell to have the chains removed through the food port. Burrell essentially threatened to kick anyone's ass who tried to come in and take the chains from her. Sgt. Hisquierdo decided to use the Tac Team to remove Burrell from her cell and escort her to cell #20.

BACKGROUND:

Burrell was arrested on 03/16/2017 by the San Diego Sheriff Department for 69 PC - Obstructing/ Resisting Executive Officer, 148.10(A)PC - Resisting Peace Officer: Causing Death/ Serious Bodily Injury. The arresting officer broke his finger during the use of force with Burrell (See NET RMS Report **(b)(5)(B)** for more information).

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From 03/27/17 to 04/16/17 four ISR's and six RVR's have been written documenting Burrell's aggressive behavior and verbal towards staff [REDACTED] (b)(5)(B) [REDACTED].

4/28/2017, Burrell spat on a deputy. A use of force ensued. Case (b)(5)(B) 05/03/2017, Tac Team cell extraction. Case (b)(5)(B) 06/26/2017, Attempted car jack of Transportation Bus. Case (b)(5)(B)

Burrell has an extensive (b)(5)(C) history [REDACTED] (b)(5)(B) [REDACTED].

At approximately 1455 hours, Lieutenant Gonzales (0707) spoke to Burrell and warned her force would be used if she did not comply and let the deputies remove the chains. Burrell essentially stated, "come and get them, I'll fuck you guys up."

At approximately 1500 hours, myself and the following deputies responded to the Tactical Response Room: Soria (3530), Ponce (3040), Joseif (9011), Carter (3436), Goldberg (3454) Ostberg (7590) and Santillanes (3160).

The Tac-Team assignments were as follows:

Sergeant Hisquierdo - Tactical Team Leader
Corporal Santillanes - Assistant Tactical Team Leader (ATL)
Deputy Jimenez (3468) - Camera
Deputy Soria - Shield (helmet #10)
Deputy Ponce - Arrest and Control (helmet #9)
Deputy Joseif - Arrest and Control (helmet #5)
Deputy Carter - Arrest and Control (helmet #4)
Deputy Goldberg - Arrest and Control (helmet #2)
Corporal Ostberg - Gunner (helmet #16)
Deputy Cazarez - Gunner (helmet #15)

The Tac Team was briefed by Sgt. Hisquierdo on the condition of the cell, along with a plan for entry and exit upon completion. Since Burrell was in her cell swinging her chains and threatening to use them as a weapon, the use of the Less Lethal Shotgun was authorized as long as I observed the 15 foot minimum distance to limit the possibility of injury. While in the Tac Room, at approximately 1530 hours, we were informed that Burrell had begun flooding her cell and putting lotion throughout the floor of her cell. Based on my experience, when an inmate does this they are preparing for the entry team, so they make the floor as slippery as possible. The water to her cell was turned off to prevent further flooding. Sgt. Hisquierdo informed us that once Burrell was extracted from her cell we would be escorting her to PSU cell #22.

Upon arrival in the PSU, the Tac Team staged next to cell #22. Corporal Ostberg paced off approximately 15 feet from Burrells cell door to ensure I was at the minimum distance to deploy the Less Lethal shotgun. I stood approximately 18 feet from her cell door. I brought the muzzle of the Less Lethal shotgun up and pointed it directly at cell #22 in anticipation of the door opening and giving Burrell verbal commands utilizing the element of surprise (Similar to the hot stop method). With this method, since Burrell had been swinging the waist chains, i believe she would have used them as a weapon potentially causing injury to deputies as they entered her cell. The goal was to place Burrell in a position of disadvantage by having her prone out on the cell floor.

At approximately 1550 hours, Burrells cell door was unlocked via the touch screen control. Corporal Santillanes utilizing a tactical lead tied to the cell door pulled the door open. With my weapon pointed, I observed Burrell standing approximately three feet inside her cell holding her mattress up in front of her to avoid being shot with less lethal munitions. The only part of Burrell that was exposed to me was her left hand while holding up her mattress. I gave Burrell several loud verbal commands to lay on her stomach on the floor. Burrell ignored my instructions and remained standing. Given the opportunity, Burrell could run out of her cell and use the waist chains as a weapon to strike the deputies outside of her cell and potentially cause injury. To ensure Burrell remained in her cell and hope to attain compliance, I aimed

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and deployed one bean bag round striking Burrell on the top of her left hand. Burrell immediately dropped her mattress and grabbed her left hand with her right hand as she retreated to the back of her cell. Burrell squatted on her bunk and covered herself up with her safety blanket. I continued to give her verbal commands to get on the floor. Burrell continued to ignore my instructions. As I gave her instructions, I advanced on her position. Once I was inside the 15 foot minimum distance, I lowered the muzzle and stepped back as Corporal Ostberg came up with the .40mm Launcher. Corporal Ostberg continued to give Burrell verbal commands to get on the floor. Burrell stood up and walked towards the wall instead of getting down on the floor. Ostberg deployed one .40mm round striking Burrell on her right midfoot. Ostberg continued to instruct Burrell to get on the floor. Burrell did not lay down on the floor, instead she laid down on her bunk.

At approximately 1551 hours, Cpl. Ostberg informed the Tac Team of Burrell's location and instructed the team to make entry.

Deputy Soria entered the cell first. Utilizing the Ice shield, Soria entered the cell and made initial contact with Burrell. Soria used the shield and body weight to pin and secure Burrell on the bunk of her cell. Soria did not activate the Ice Shield (see officer's report for further details). Simultaneously, Deputy Ponce, who was the second deputy to enter the cell, grasped Burrell's left arm and hand, Deputy Joseif entered the cell and grasped Burrell's right arm using both of her hands, Deputy Carter entered the cell and secured Burrell's right ankle with both of her hands to prevent Burrell's legs from kicking, Deputy Goldberg entered the cell and grabbed Burrell's left ankle with both of her hands in order to control Burrell's legs from kicking. Burrell actively resisted the Tac Team efforts to secure her by thrashing her body around and holding her hands under her chest. Force was used in order to secure Burrell (see officer's reports for details).

To make it easier for the Tac Team to operate, Burrell was lifted off her bunk and placed on the floor of her cell. Cpl. Santillanes gave Burrell verbal commands to stop resisting and allow the deputies to place handcuffs on her. Deputy Ponce released control of Burrell in order to unlock the lock on the waist chains. Burrell attempted to bite Ponce. Cpl Santillanes utilizing her X-2 TASER deployed one, three second cycle in drive stun mode. Burrell continued to thrash about. Deputies continued to use force (see officer's reports for details).

Once Burrell was secured, the Tac Team deputies lifted Burrell and carried her out of her cell in order to place her on a gurney. Once Burrell was outside her cell she was placed on the dayroom floor while the gurney was brought in. In order to place Burrell on the gurney, Ponce grasped Burrell's left arm with both her hands, Joseif grasped Burrell's right arm using both her hands, Carter grasped Burrell's right leg using both hands and Deputy Goldberg grasped Burrell's left leg using both hands. Once all of Burrell's limbs were secured, Burrell was lifted and placed on the gurney which was located outside her cell in the module dayroom.

Burrell was placed onto her stomach. Burrell began to thrash around again. Cpl. Santillanes deployed a 2 second cycle with her X-2 TASER in drive stun mode. Burrell was ultimately secured with the straps that are attached to the gurney. Once Burrell was completely secured, her jail issued green clothes were cut off using safety scissors. Cpl. Ostberg and I stepped out of view during this process. Nurs (b)(5)(A) medicated Burrell via two injections. Nurses (b)(5)(A) and (b)(5) evaluated and treated Burrell's wounds. Burrell sustained a laceration on her mid foot from the .40mm round. The laceration would require sutures to close. It was determined Burrell would need to be transported to the Emergency Room for treatment.

The Tac Team deputies wheeled Burrell to the Intake Sallyport area in preparation for transport. Once in the sallyport, Deputies Soria and Joseif assisted Burrell to the seated position. Deputies Ponce and Goldberg assisted Burrell to stand up and escorted her to the transportation vehicle. Burrell was assisted into the back seat of the vehicle. Deputy Goldberg secured Burrell's seat belt. Once Burrell was secured in the vehicle the Tac Team deputies had no further contact with Burrell.

A handheld camera was used to film the incident; the footage will be attached to this report. Still images from the handheld camera footage were created to document any injuries Burrell may have sustained and attached to this report.

Lt. Gonzales, Sgts. Hisquierdo, Sprengelmeyer #5440, and Sgt. Poirier (1068), were present during the incident.

Cpl. Ostberg, Deputy Hardwick (3453) and I transported Burrell to the Grossmont Emergency Room. We remained with Burrell until relieved at approximately 1815 hours. We had no further contact with Burrell.

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Evidence:

Deputy Jimenez (3468) placed all video footage and digital photos onto disc and packaged them into k-pac bags.

Item #1

Description: 1 DVDs containing video from hand held camera.

How marked: VJ (3468), 09/12/2017

Disposition: Placed into LCDRF evidence locker #20

Item #2

Description: 1 DVD containing video from hand held camera.

How marked: VJ (3468), 09/12/2017

Disposition: Placed into LCDRF evidence locker #20

Item #3

Description: 1 DVD containing video from Facility CCTV

How marked: VJ (3468), 09/12/2017

Disposition: Placed into LCDRF evidence locker #20

Item #4

Description: 1 CD containing 4 digital photos

How marked: VJ (3468), 09/12/2017

Disposition: Placed into LCDRF evidence locker #20

INJURIES:

Burrell sustained a laceration on her right mid foot. Burrell was transported to Grossmont Hospital where she received 10 sutures to close the wound. Burrell had bruising on the top of her left hand.

WITNESSES:

Lt Gonzales (0707)
Sgt. Hisquierdo (4644)
Sgt. Poirier (1068)
Sgt. Sprengelmeyer (5440)
Deputy Applebaum (3075)
Deputy Jimenez (3468)

RELATED REPORTS:

Officer Reports by:

Corporal Ostberg (7590)
Corporal Santillanes (3160)
Deputy Ponce (3040)
Deputy Soria (3468)
Deputy Joseif (9011)
Deputy Goldberg (3454)
Deputy Carter (3436)

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Use of Force Supplemental

UFO DATE AND TIME 9/11/2017 15:50	EVENT NUMBER E4421100	CASE NUMBER 17147578	DOCUMENT NUMBER 66366	STATION/FACILITY LCDR - Las Colinas Detention and Re-Entry Facility
INCIDENT DESCRIPTION / OFFENSES Cell Extraction				
SUBJECT'S NAME (LAST, FIRST, MI) Burrell, Kandrigua		DATE OF BIRTH (b)(5)(A)	ARRESTED <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	SUPERVISOR PRESENT <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
DATE/TIME SUPERVISOR NOTIFIED 09/11/2017 15:50				
REASON(S) FOR USING FORCE: <input type="checkbox"/> Necessary to effect an arrest <input type="checkbox"/> Necessary to prevent a violent forcible felony <input type="checkbox"/> Delaying Jail Operations <input type="checkbox"/> Necessary to defend self or another <input checked="" type="checkbox"/> Necessary to restrain for subject's safety <input type="checkbox"/> Necessary to prevent escape/evasion <input type="checkbox"/> Necessary during high-risk incident <input type="checkbox"/> Necessary to effect a lawful detention <input type="checkbox"/> Necessary during riot				
SUBJECT APPEARED TO BE <input type="checkbox"/> Under the influence of alcohol and/or drugs <input checked="" type="checkbox"/> Mentally impaired		NUMBER OF OFFICERS ON SCENE 13		NUMBER OF OFFICERS USING FORCE 1
LEVEL(S) OF RESISTANCE ENCOUNTERED <input type="checkbox"/> NONE (subject cooperated/complied) <input type="checkbox"/> PSYCHOLOGICAL INTIMIDATION (non-verbal cues indicating subject's attitude or physical readiness to resist) <input type="checkbox"/> VERBAL NON-COMPLIANCE (subject's expressed unwillingness to comply with the officer's commands) <input type="checkbox"/> PASSIVE RESISTANCE (represents by a refusal to respond to verbal commands but also offers no form of physical resistance) <input type="checkbox"/> ACTIVE RESISTANCE (pushing, pulling or running away from the officer to avoid control; not attempting to harm the officer) <input checked="" type="checkbox"/> ASSAULTIVE BEHAVIOR (physical actions of assault) <input type="checkbox"/> AGGRAVATED ACTIVE AGGRESSION (potential injury or death)				
LAW ENFORCEMENT TOOL/TECHNIQUE USED TO GAIN COMPLIANCE OR OVERCOME RESISTANCE (CHECK ALL THAT APPLY) <input checked="" type="checkbox"/> Verbal Commands: <u>get on the ground, lay on your stomach, get down now</u> <input type="checkbox"/> Empty Hand Control <input type="checkbox"/> Grab, Push, Pull, or Body Weight <input type="checkbox"/> Control Hold (Duration:) <input type="checkbox"/> Pressure Point (Duration:) (# of Contacts:) <input type="checkbox"/> Strike (Body part used:) (# of Contacts:) <input type="checkbox"/> Takedown Type: _____ <input type="checkbox"/> Carotid (Rendered Unconscious? <input type="checkbox"/> Yes <input type="checkbox"/> No) (Duration:) <input type="checkbox"/> Tool/Device/Weapon <input type="checkbox"/> OC Agent (Duration:) (# of Contacts:) <input type="checkbox"/> Decontaminated <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Cord Cuff Restraint Device (Duration:) <input type="checkbox"/> Impact Weapon (# of Contacts:) Type: _____ <input type="checkbox"/> Canine (Duration:) (# of Contacts:) <input type="checkbox"/> Vehicle/Forcible Stop <input type="checkbox"/> Weapon Pointed at Subject (Duration:) Type: _____ <input type="checkbox"/> Spit Sock (Duration:) <input type="checkbox"/> Pro-Straint Chair <input type="checkbox"/> Tactical Shield <input type="checkbox"/> WRAP <input checked="" type="checkbox"/> Less-Lethal Weapon System <input type="checkbox"/> PepperBall - OC Powder <input type="checkbox"/> PepperBall - Water <input type="checkbox"/> 37 mm Rifle - Standard <input type="checkbox"/> 37 mm Rifle - Low Energy <input type="checkbox"/> 40 mm Rifle - Bean Bag <input type="checkbox"/> 40 mm Rifle - Sponge <input type="checkbox"/> Taser - Probes <input type="checkbox"/> Taser - Drive Stuns <input type="checkbox"/> Stingball Grenade <input type="checkbox"/> Sound/Light device <input checked="" type="checkbox"/> 12-Gauge Super Sock <input type="checkbox"/> Ultron/NOVA Shield <input type="checkbox"/> REACT Belt <input type="checkbox"/> Firearm <input type="checkbox"/> Type: _____ <input type="checkbox"/> Other: _____				
Discharges: _____ Number of: _____ Target: _____ 1 1 21 feet				
WAS INITIAL USE OF FORCE EFFECTIVE? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No WAS ADDITIONAL CONTROL OR FORCE NEEDED? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No				
SUBJECT INJURED <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		EXTENT OF TREATMENT <input type="checkbox"/> None <input checked="" type="checkbox"/> Treated at hospital <input type="checkbox"/> Treated at scene <input type="checkbox"/> Hospitalized <input type="checkbox"/> Refused treatment		
OFFICER(S) INJURED <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		EXTENT OF TREATMENT <input checked="" type="checkbox"/> None <input type="checkbox"/> Treated at hospital <input type="checkbox"/> Treated at scene <input type="checkbox"/> Hospitalized <input type="checkbox"/> Refused treatment		
SUBJECT INJURY DESCRIPTION		OFFICER INJURY DESCRIPTION		
OTHER FORCE USED/COMMENTS/EQUIPMENT PERFORMANCE:				
SERGEANT		ARJIS	DATE	
LIEUTENANT		ARJIS	DATE	
CAPTAIN		ARJIS	DATE	
 MARK FIGURE TO INDICATE CONTACT POINT(S)				



San Diego County Sheriff's Department

Use of Force Supplemental

Use of Force Supplemental Instructions

Lines 1 & 3: Fill in the blanks.

Line 2: If the suspect was committing a crime and force was used to stop or apprehend the subject, document the appropriate penal code. If the UOF occurred in the performance of the officer's duties, document the incident description, i.e. officer transport, officer escort, making arrest, detaining suspect, cell extraction etc.

Primary Reason for Using Force: Check appropriate box(s).

Subject Appeared To Be: Check if applicable.

Number of Officers on Scene: List number of officers present.

Number of Officers Using Force: List number of officers that used force.

Level(s) of Resistance Encountered: Check appropriate box(s).

L.E. Tool/Technique Used: Check appropriate box(s). If known and/or applicable, include duration (approximate length of time) tool/technique was used. If known and/or applicable, include the number of contacts (approximate number of strikes, impacts, etc.) when requested on form.

Was Initial Use of Force Effective? If initial force used was effective, check "Yes." If initial force used was ineffective and additional force was necessary, check "No."

Was Additional Control or Force Needed: If initial force used was ineffective and additional force was necessary, check "Yes." If initial force used was effective, check "No."

Target Distance: If applicable (refers primarily to less lethal weapon systems), approximate distance or provide range (i.e. 7-15 feet, 15-20 yards, etc.) from subject during application of force.

Subject Injured: Check "Yes" if medically treated for injury sustained as a possible result of force applied by a officer(s) – does not include previous injuries suffered prior to officer contact. Check "No" if subject was not injured or simply complains of injury/pain suffered as a result of force applied by an officer(s) and refuses medical attention. Any complaints of pain shall be documented in the use of force report narrative (whenever any physical force used by a officer results in a complaint of injury or an injury that necessitates medical treatment of a subject, a supervisor will be notified immediately).

Extent of Treatment: Check appropriate box. Check none if subject was evaluated and no treatment was required. Specifically, check "Treated at Scene" if subject was treated at scene by EMS for injuries that may have resulted due to force applied by officer(s). Check "Treated at Hospital" if subject was transported to hospital for treatment of injuries that may have been sustained as an apparent result of force applied by officer(s). Check "Hospitalized" if subject was admitted to the Hospital as a result of injuries that were sustained as a result of force applied by officer(s).

Officer Injured: Check appropriate box (see above).

Extent of Treatment: Check appropriate box. Check none if officer was evaluated and no treatment was required. Specifically, check "Treated at Scene" if officer was treated at scene by EMS for injuries. Check "Treated at Hospital" if officer was transported to hospital for treatment of injuries. Check "Hospitalized" if officer was admitted to the Hospital as a result of injuries.

Other Force Used/Comments/Equipment Performance: This section can be used to document other force options not listed on the form; relevant comments about the incident such as complaints of pain/injury (room permitting) and negative/positive comments regarding equipment performance.

Mark Figure to Indicate Contact Points: When applicable, mark the areas on the figure where applied force contacted the subject's body.

Sergeant: Sign, list ARJIS number and date reviewed.

Lieutenant: Sign, list ARJIS number and date reviewed.

Captain: Sign, list ARJIS number and date reviewed.



San Diego County Sheriff's Department Officer Report

CAD Event No. **E4421100**Case No. **17147578**Report No. **66367****1**
Page 1 of 2**GENERAL CASE INFORMATION**

Special Studies:		Related Cases:	
Location, City, State, ZIP: 451 Riverview Parkway, Santee, CA 92071		Occurred On: 9/11/2017 3:50:00 PM (Monday)	
Jurisdiction: DETENTION FACILITY - LAS COLINAS WOMENS	Beat: 024	Call Source:	(and Between):

INDIVIDUAL/S

Name: Burrell, Kandrigua				Person Code:		Interpreter Language:	
Home Address, City, State, ZIP: Unknown				Res. Country:		County Residence: N Nonresident	
Race: B		Sex: F		Date of Birth / Age: (b)(5)(A) - 19		Height: 5' 6"	
Weight: 130 lbs		Hair Color: BLK		Eye Color: BRO		Facial Hair: 12 - None/Fuzz	
Complexion: DRK - Dark		Employment Status: U - Unemployed		Occupation/Grade:		Employer/School:	
Employer Address, City, State, ZIP:		CONTACT INFORMATION					
IDENTIFICATION:							
Type: JIM - JIMS Number		Number: (b)(5)(C)		State: CA - California		Country: US - UNITED STATES	
Type: BN - Booking Number		Number: 17116878		State: CA - California		Country: US - UNITED STATES	
Type: CII - CII Number		Number: (b)(5)(C)		State: CA - California		Country: US - UNITED STATES	
Attire: Jail Greens		Injury: Yes		Extent Of Treatment: 3 - Treated at Hospital		Violent Crime Circumstances:	
Subject Injury Description:							
Officer Injury Description:							

REPORT NARRATIVE

Case #17147578
Event #E4421100

ORIGIN:

On 09/11/2017, I was assigned the Intake Rover Deputy position at the Las Colinas Detention Reentry Facility (LCDRF). At approximately 1500 hours, I was assigned to the Tactical Team position of Assistant Team Leader (ATL) for the purpose of extracting inmate Kandrigua Burrell (BN: 17116878) in the Women's Psychiatric Security Unit (Cell #22).

DEPUTY'S OBSERVATIONS AND ACTIONS:

The Tactical Team was briefed by Sergeant Hisquierdo (4644) that Burrell refused to allow the waist and leg chains to be removed. We were also briefed Burrell slid the waist chain off her body and was hitting the cell door with the chain threatening to fight anyone who entered her cell. Several attempts were made by deputies and supervisors to safely retrieve the waist and leg chains. Burrell refused to comply. Burrell flooded the cell floor with water.

The Tactical Team arrived outside of Burrell's assigned Cell #22 in the WPSU.

I heard Burrell yell, "Let's go! Open the fucking door!"

Once all Tactical Team members were in place and ready, I signaled for the cell door to be released. I assisted in pulling the door open with the tactical lead once it was released. Once the door was open, I held my department issued X-2 Taser in the low ready position in case Burrell ran out of the cell towards me. The cell door was opened and Deputy Cazarez (2691) and Corporal Ostberg (7590) gave Burrell verbal commands to get on her stomach.

Reporting Officer SH3160 - SANTILLANES, NADINE	Division / Organization LCDR / Lcdr - Las Colinas Detention and Re-Entry Facility	Reviewed By SH1068 - POIRIER, ALMA
Report Date 9/12/2017 9:49:55 AM	Detective Assigned	Reviewed Date 9/19/2017 10:56:50 AM



San Diego County Sheriff's Department Officer Report

CAD Event No. **E4421100**

Case No. **17147578**

Report No. **66367**

2

Page 2 of 2

I heard the firing of the less lethal weapons with commands given by Deputy Cazarez and Corporal Ostberg for Burrell to get on the ground. I maintained my department issued X-2 Taser in the low ready position.

Corporal Ostberg informed the Tactical Team Burrell was lying on her side on the cell bed. The Tactical Team was given the command to enter the cell. The Tactical Team moved towards Burrell to place Burrell in the prone position on the cell floor. I entered the cell and gave the Tactical Team instructions to get Burrell off the bed. I kept my department issued X-2 Taser in the low ready position.

The Tactical Team lifted Burrell off the bed and placed her on the cell floor. Once on the cell floor, Burrell began thrashing her body from side to side to prevent the Tactical Team from gaining control. As Deputies Ponce (3040) and Joseif (9011) attempted to unlock the waist chain to secure it around Burrell's waist, Burrell attempted to bite and grab their hands while continuing to violently thrash her head from side to side. I gave verbal commands to Burrell to "Stop fighting!" I told Burrell, "Stop Resisting! Give the deputies your hands!" Burrell did not comply and continued aggressively thrash her body and biting.

To overcome Burrell's resistance, prevent her from biting deputies and prevent her injuring my partners I used my department issued X-2 Taser to "drive stun" Burrell in the right buttock twice. The first drive stun lasted three seconds. Burrell stopped thrashing her body for a few minutes, which allowed Deputies Ponce and Joseif to gain control of Burrell's hands.

Before the waist chain was secured, Burrell began to thrash her head and body again. I used my department issued X-2 Taser to "drive stun" Burrell again in the right buttock. Burrell stopped resisting and the Tactical Team was able to gain and maintain control. I instructed Burrell to comply with the instructions given to her.

Once the waist chain was secured, I instructed the Tactical Team to remove Burrell from the cell. Burrell was placed in the prone position in the WPSU dayroom outside the cell. Burrell began biting at Deputy Joseif's hands again. Deputy Ponce placed a spit sock on Burrell's head. Burrell was lifted onto the medical gurney by the Tactical Team in the prone position outside the cell. Burrell was secured onto the medical gurney.

Deputies Soria (3530) and Ponce placed handcuffs on Burrell's wrists so the waist chain could be removed. Once the handcuffs were secured to Burrell's wrists, Deputies Soria and Ponce double locked the handcuffs and removed the waist chain. Deputies Ponce and Goldberg used safety scissors to remove the jail issued clothing from Burrell's body. Medical staff took Burrell's vitals and gave her medication. I placed a green safety blanket over Burrell's body to cover her naked body.

After the medical process was completed by nurses, it was determined Burrell would be transported to the hospital for further medical treatment. I instructed the Tactical Team to move Burrell via the medical gurney to Intake. When Burrell was in Intake, the green safety blanket was removed and a green safety garment was placed on Burrell.

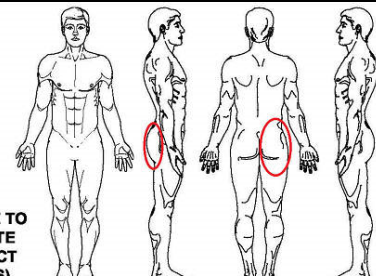
Once the transporting vehicle was inside the Intake vehicle sally port, I advised Burrell she would need to remain compliant while being moved from the gurney to the vehicle. Burrell told me she understood and stated she would not resist. The Tactical Team assisted Burrell from the medical gurney to a standing position. Burrell was then escorted to the vehicle. Burrell was secured with a seat belt, the vehicle door was secured and I had no further contact with Burrell.

Reporting Officer SH3160 - SANTILLANES, NADINE	Division / Organization LCDR / LCDR - Las Colinas Detention and Re-Entry Facility	Reviewed By SH1068 - POIRIER, ALMA
Report Date 9/12/2017 9:49:55 AM	Detective Assigned	Reviewed Date 9/19/2017 10:56:50 AM



San Diego County Sheriff's Department

Use of Force Supplemental

UFO DATE AND TIME 9/11/2017 15:50	EVENT NUMBER E4421100	CASE NUMBER 17147578	DOCUMENT NUMBER 66367	STATION/FACILITY LCDR - Las Colinas Detention and Re-Entry Facility
INCIDENT DESCRIPTION / OFFENSES Cell Extraction				
SUBJECT'S NAME (LAST, FIRST, MI) Burrell, Kandrigua		DATE OF BIRTH (b)(5)(A)	ARRESTED <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	SUPERVISOR PRESENT <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
DATE/TIME SUPERVISOR NOTIFIED 09/11/2017 15:50				
REASON(S) FOR USING FORCE: <input type="checkbox"/> Necessary to effect an arrest <input checked="" type="checkbox"/> Necessary to prevent a violent forcible felony <input type="checkbox"/> Delaying Jail Operations <input checked="" type="checkbox"/> Necessary to defend self or another <input checked="" type="checkbox"/> Necessary to restrain for subject's safety <input type="checkbox"/> Necessary to prevent escape/evasion <input checked="" type="checkbox"/> Necessary during high-risk incident <input type="checkbox"/> Necessary to effect a lawful detention <input type="checkbox"/> Necessary during riot				
SUBJECT APPEARED TO BE <input type="checkbox"/> Under the influence of alcohol and/or drugs <input checked="" type="checkbox"/> Mentally impaired		NUMBER OF OFFICERS ON SCENE 13		NUMBER OF OFFICERS USING FORCE 1
LEVEL(S) OF RESISTANCE ENCOUNTERED <input type="checkbox"/> NONE (subject cooperated/complied) <input type="checkbox"/> PSYCHOLOGICAL INTIMIDATION (non-verbal cues indicating subject's attitude or physical readiness to resist) <input checked="" type="checkbox"/> VERBAL NON-COMPLIANCE (subject's expressed unwillingness to comply with the officer's commands) <input type="checkbox"/> PASSIVE RESISTANCE (represents by a refusal to respond to verbal commands but also offers no form of physical resistance) <input checked="" type="checkbox"/> ACTIVE RESISTANCE (pushing, pulling or running away from the officer to avoid control; not attempting to harm the officer) <input checked="" type="checkbox"/> ASSAULTIVE BEHAVIOR (physical actions of assault) <input checked="" type="checkbox"/> AGGRAVATED ACTIVE AGGRESSION (potential injury or death)				
LAW ENFORCEMENT TOOL/TECHNIQUE USED TO GAIN COMPLIANCE OR OVERCOME RESISTANCE (CHECK ALL THAT APPLY) <input checked="" type="checkbox"/> Verbal Commands: "Stop fighting!" "Stop resisting!" "Give the deputies your hands!" <input type="checkbox"/> Empty Hand Control <input type="checkbox"/> Grab, Push, Pull, or Body Weight <input type="checkbox"/> Control Hold (Duration:) <input type="checkbox"/> Pressure Point (Duration:) (# of Contacts:) <input type="checkbox"/> Strike (Body part used:) (# of Contacts:) <input type="checkbox"/> Takedown Type: _____ <input type="checkbox"/> Carotid (Rendered Unconscious? <input type="checkbox"/> Yes <input type="checkbox"/> No) (Duration:) <input checked="" type="checkbox"/> Tool/Device/Weapon <input type="checkbox"/> OC Agent (Duration:) (# of Contacts:) <input type="checkbox"/> Decontaminated <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Cord Cuff Restraint Device (Duration:) <input type="checkbox"/> Impact Weapon (# of Contacts:) Type: _____ <input type="checkbox"/> Canine (Duration:) (# of Contacts:) <input type="checkbox"/> Vehicle/Forcible Stop <input checked="" type="checkbox"/> Weapon Pointed at Subject (Duration: 5 seconds) Type: X-2 Taser <input type="checkbox"/> Spit Sock (Duration:) <input type="checkbox"/> Pro-Strait Chair <input type="checkbox"/> Tactical Shield <input type="checkbox"/> WRAP <input checked="" type="checkbox"/> Less-Lethal Weapon System <input type="checkbox"/> PepperBall - OC Powder <input type="checkbox"/> PepperBall - Water <input type="checkbox"/> 37 mm Rifle - Standard <input type="checkbox"/> 37 mm Rifle - Low Energy <input type="checkbox"/> 40 mm Rifle - Bean Bag <input type="checkbox"/> 40 mm Rifle - Sponge <input type="checkbox"/> Taser - Probes <input checked="" type="checkbox"/> Taser - Drive Stuns <input type="checkbox"/> Stingball Grenade <input type="checkbox"/> Sound/Light device <input type="checkbox"/> 12-Gauge Super Sock <input type="checkbox"/> Ultron/NOVA Shield <input type="checkbox"/> REACT Belt <input type="checkbox"/> Firearm <input type="checkbox"/> Type: _____ <input type="checkbox"/> Other: _____				
WAS INITIAL USE OF FORCE EFFECTIVE? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
WAS ADDITIONAL CONTROL OR FORCE NEEDED? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No				
SUBJECT INJURED <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		EXTENT OF TREATMENT <input type="checkbox"/> None <input checked="" type="checkbox"/> Treated at hospital <input type="checkbox"/> Treated at scene <input type="checkbox"/> Hospitalized <input type="checkbox"/> Refused treatment		
OFFICER(S) INJURED <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		EXTENT OF TREATMENT <input checked="" type="checkbox"/> None <input type="checkbox"/> Treated at hospital <input type="checkbox"/> Treated at scene <input type="checkbox"/> Hospitalized <input type="checkbox"/> Refused treatment		
SUBJECT INJURY DESCRIPTION		OFFICER INJURY DESCRIPTION		
OTHER FORCE USED/COMMENTS/EQUIPMENT PERFORMANCE:				
SERGEANT		ARJIS	DATE	
LIEUTENANT		ARJIS	DATE	
CAPTAIN		ARJIS	DATE	
 MARK FIGURE TO INDICATE CONTACT POINT(S)				



San Diego County Sheriff's Department

Use of Force Supplemental

Use of Force Supplemental Instructions

Lines 1 & 3: Fill in the blanks.

Line 2: If the suspect was committing a crime and force was used to stop or apprehend the subject, document the appropriate penal code. If the UOF occurred in the performance of the officer's duties, document the incident description, i.e. officer transport, officer escort, making arrest, detaining suspect, cell extraction etc.

Primary Reason for Using Force: Check appropriate box(s).

Subject Appeared To Be: Check if applicable.

Number of Officers on Scene: List number of officers present.

Number of Officers Using Force: List number of officers that used force.

Level(s) of Resistance Encountered: Check appropriate box(s).

L.E. Tool/Technique Used: Check appropriate box(s). If known and/or applicable, include duration (approximate length of time) tool/technique was used. If known and/or applicable, include the number of contacts (approximate number of strikes, impacts, etc.) when requested on form.

Was Initial Use of Force Effective? If initial force used was effective, check "Yes." If initial force used was ineffective and additional force was necessary, check "No."

Was Additional Control or Force Needed: If initial force used was ineffective and additional force was necessary, check "Yes." If initial force used was effective, check "No."

Target Distance: If applicable (refers primarily to less lethal weapon systems), approximate distance or provide range (i.e. 7-15 feet, 15-20 yards, etc.) from subject during application of force.

Subject Injured: Check "Yes" if medically treated for injury sustained as a possible result of force applied by a officer(s) – does not include previous injuries suffered prior to officer contact. Check "No" if subject was not injured or simply complains of injury/pain suffered as a result of force applied by an officer(s) and refuses medical attention. Any complaints of pain shall be documented in the use of force report narrative (whenever any physical force used by a officer results in a complaint of injury or an injury that necessitates medical treatment of a subject, a supervisor will be notified immediately).

Extent of Treatment: Check appropriate box. Check none if subject was evaluated and no treatment was required. Specifically, check "Treated at Scene" if subject was treated at scene by EMS for injuries that may have resulted due to force applied by officer(s). Check "Treated at Hospital" if subject was transported to hospital for treatment of injuries that may have been sustained as an apparent result of force applied by officer(s). Check "Hospitalized" if subject was admitted to the Hospital as a result of injuries that were sustained as a result of force applied by officer(s).

Officer Injured: Check appropriate box (see above).

Extent of Treatment: Check appropriate box. Check none if officer was evaluated and no treatment was required. Specifically, check "Treated at Scene" if officer was treated at scene by EMS for injuries. Check "Treated at Hospital" if officer was transported to hospital for treatment of injuries. Check "Hospitalized" if officer was admitted to the Hospital as a result of injuries.

Other Force Used/Comments/Equipment Performance: This section can be used to document other force options not listed on the form; relevant comments about the incident such as complaints of pain/injury (room permitting) and negative/positive comments regarding equipment performance.

Mark Figure to Indicate Contact Points: When applicable, mark the areas on the figure where applied force contacted the subject's body.

Sergeant: Sign, list ARJIS number and date reviewed.

Lieutenant: Sign, list ARJIS number and date reviewed.

Captain: Sign, list ARJIS number and date reviewed.



San Diego County Sheriff's Department Officer Report

CAD Event No. **e4431100**Case No. **17147578**Report No. **66368****1**

Page 1 of 2

GENERAL CASE INFORMATION

Special Studies:		Related Cases:	
Location, City, State, ZIP: 951 Riverview Pky, Santee, CA 92071		Occurred On: 9/11/2017 3:50:00 PM (Monday)	
Jurisdiction: DETENTION FACILITY - LAS COLINAS WOMENS	Beat: 024	Call Source:	(and Between):

INDIVIDUAL/S

Name: Burrell, Kandriqua				Person Code:		Interpreter Language:			
ALIAS / AKA / NICKNAME / MONIKER:									
Name Type: Alias/AKA		First: Kavricia		Middle:		Last: McKoy		Suffix:	
Name Type: Alias/AKA		First: Kalani		Middle:		Last: Williams		Suffix:	
Home Address, City, State, ZIP:				Res. Country:		County Residence: N Nonresident		Undocumented:	
Race: B	Sex: F	Date of Birth / Age: (b)(5)(A) - 19	Height: 5' 6"	Weight: 130 lbs	Hair Color: BLK	Eye Color: BRO	Facial Hair: 12 - None/Fuzz	Complexion:	
Employment Status: U - Unemployed		Occupation/Grade:		Employer/School:		Employer Address, City, State, ZIP:			

**CONTACT INFORMATION
IDENTIFICATION:**

Type: DLN - Drivers License Number	Number: (b)(5)(A)	State:	Country:		
Type: FBI - FBI No.	Number: (b)(5)(C)	State:	Country:		
Type: CII - CII Number	Number: (b)(5)(C)	State:	Country:		
Attire: Jail Issued Greens		Injury: Yes	Extent Of Treatment: 3 - Treated at Hospital	Violent Crime Circumstances:	
Subject Injury Description:					
Officer Injury Description:					

REPORT NARRATIVECase # 17147578
E4421100**ORIGIN:**

On 09/11/2017, I was assigned to the 1C Housing Deputy Position at the Las Colinas Detention and Re-Entry Facility (LCDRF). At approximately 1500 hours, I received a radio call to report to the tactical response room.

DEPUTY'S OBSERVATIONS AND ACTIONS:

Once inside the Tactical Response Room, the tactical team was briefed by Sgt. Hisquierdo (4644) that we needed to extract Inmate Kandrigua Burrell (BN17116878) out of her cell to be force medicated. I was assigned to the Tactical Team Position of arrest and control (helmet #4). The tactical team was informed that Burrell had slipped out of the waist chains, and was swinging them around in the cell.

At approximately 1548 hours, the tactical team was ready and in place outside of cell #22 in the WPSU. I heard Burrell yell through the door "Let's go, open the door." Assistant Team Leader (ATL) Deputy Santillanes (3160) signaled for the cell door to be opened. The cell door was opened and Deputy Cazarez (2691) gave Burrell verbal commands to get on the floor. I heard the firing of a less lethal weapon and more commands were given to Burrell by Deputy Ostberg (7590) to get on the floor. I heard the firing of another less lethal weapon, and Deputy Ostberg briefed the tactical team that Burrell was lying down on the right side of the bunk underneath the blanket. Deputy Ostberg signaled for the tactical team to make entry into the cell.

Reporting Officer SH3436 - CARTER, ASHLEY	Division / Organization LCDR / LCDR - Las Colinas Detention and Re-Entry Facility	Reviewed By SH1068 - POIRIER, ALMA
Report Date 9/12/2017 10:40:12 AM	Detective Assigned	Reviewed Date 9/19/2017 10:58:34 AM



San Diego County Sheriff's Department Officer Report

CAD Event No. **e4431100**

Case No. **17147578**

Report No. **66368**

2

Page 2 of 2

Burrell was lying in the prone position on the bunk. Upon entry, I immediately got on the top of the bunk and took control of Burrell's right leg with both of my hands. Burrell was kicking her legs, and thrashing her body. I applied downward pressure on Burrell's right leg with both of my hands to prevent her from kicking myself and my partner, and from thrashing her lower body. Burrell continued to try to kick her right leg.

I assisted in lifting Burrell's right leg with both hands when the tactical team repositioned her on the floor because there was more space to remove the waist chains and secure her in handcuffs. Burrell continued to disobey commands of the deputies and thrashed her body. Burrell was kicking her legs and tried to roll over. I applied downward pressure to Burrell's right leg with my right hand and pulled on the leg chain with my left hand. This momentarily prevented Burrell from kicking.

The tactical team began to remove Burrell from the cell so she could be placed on a medical gurney. I held onto Burrell's right ankle with both of my hands when she jammed her right foot in the doorway of the cell to prevent the tactical team from pulling her out of the cell. With my right hand, I grabbed her right foot and twisted it away from the door way so she could be successfully removed from the cell. Burrell stopped resisting.

Once outside of the cell, I assisted in lifting Burrell onto the medical gurney by supporting her right leg with both of my hands. Burrell began to kick her legs. I applied downward pressure with both of my hands to Burrell's right leg to prevent her from kicking while she was being secured on the gurney. Burrell stopped resisting.

Once Burrell was secured on the gurney, she was medicated and had her right foot bandaged by the nursing staff. Burrell's clothes were removed and she was given a clean green safety blanket. Burrell was transported via gurney to the Intake area. I assisted Burrell off of the gurney by removing the leg straps from her legs. Using both hands, I held onto Burrell's ankles and assisted in rolling her onto her back. As I continued to hold onto her ankles, I guided her feet off of the gurney so my partners could place her into a seated position.

I had no further contact with Burrell.

Reporting Officer SH3436 - CARTER, ASHLEY	Division / Organization LCDR / LCDR - Las Colinas Detention and Re-Entry Facility	Reviewed By SH1068 - POIRIER, ALMA
Report Date 9/12/2017 10:40:12 AM	Detective Assigned	Reviewed Date 9/19/2017 10:58:34 AM



San Diego County Sheriff's Department

Use of Force Supplemental

UFO DATE AND TIME 9/11/2017 15:50	EVENT NUMBER e4431100	CASE NUMBER 17147578	DOCUMENT NUMBER 66368	STATION/FACILITY LCDR - Las Colinas Detention and Re-Entry Facility
INCIDENT DESCRIPTION / OFFENSES Cell Extraction				
SUBJECT'S NAME (LAST, FIRST, MI) Burrell, Kandriqua		DATE OF BIRTH (b)(5)(A)	ARRESTED <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	SUPERVISOR PRESENT <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
DATE/TIME SUPERVISOR NOTIFIED 09/11/2017 15:50				
REASON(S) FOR USING FORCE: <input type="checkbox"/> Necessary to effect an arrest <input type="checkbox"/> Necessary to prevent a violent forcible felony <input type="checkbox"/> Delaying Jail Operations <input checked="" type="checkbox"/> Necessary to defend self or another <input checked="" type="checkbox"/> Necessary to restrain for subject's safety <input checked="" type="checkbox"/> Necessary to prevent escape/evasion <input type="checkbox"/> Necessary during high-risk incident <input type="checkbox"/> Necessary to effect a lawful detention <input type="checkbox"/> Necessary during riot				
SUBJECT APPEARED TO BE <input type="checkbox"/> Under the influence of alcohol and/or drugs <input checked="" type="checkbox"/> Mentally impaired		NUMBER OF OFFICERS ON SCENE 13		NUMBER OF OFFICERS USING FORCE 1
LEVEL(S) OF RESISTANCE ENCOUNTERED <input type="checkbox"/> NONE (subject cooperated/complied) <input type="checkbox"/> PSYCHOLOGICAL INTIMIDATION (non-verbal cues indicating subject's attitude or physical readiness to resist) <input type="checkbox"/> VERBAL NON-COMPLIANCE (subject's expressed unwillingness to comply with the officer's commands) <input type="checkbox"/> PASSIVE RESISTANCE (represents by a refusal to respond to verbal commands but also offers no form of physical resistance) <input checked="" type="checkbox"/> ACTIVE RESISTANCE (pushing, pulling or running away from the officer to avoid control; not attempting to harm the officer) <input checked="" type="checkbox"/> ASSAULTIVE BEHAVIOR (physical actions of assault) <input checked="" type="checkbox"/> AGGRAVATED ACTIVE AGGRESSION (potential injury or death)				
LAW ENFORCEMENT TOOL/TECHNIQUE USED TO GAIN COMPLIANCE OR OVERCOME RESISTANCE (CHECK ALL THAT APPLY)				
<input type="checkbox"/> Verbal Commands: <input checked="" type="checkbox"/> Empty Hand Control <input checked="" type="checkbox"/> Grab, Push, Pull, or Body Weight <input type="checkbox"/> Control Hold (Duration:) <input type="checkbox"/> Pressure Point (Duration:) (# of Contacts:) <input type="checkbox"/> Strike (Body part used:) (# of Contacts:) <input type="checkbox"/> Takedown Type: _____ <input type="checkbox"/> Carotid (Rendered Unconscious? <input type="checkbox"/> Yes <input type="checkbox"/> No) (Duration:) <input type="checkbox"/> Tool/Device/Weapon <input type="checkbox"/> OC Agent (Duration:) (# of Contacts:) <input type="checkbox"/> Decontaminated <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Cord Cuff Restraint Device (Duration:) <input type="checkbox"/> Impact Weapon (# of Contacts:) Type: _____ <input type="checkbox"/> Canine (Duration:) (# of Contacts:) <input type="checkbox"/> Vehicle/Forcible Stop <input type="checkbox"/> Weapon Pointed at Subject (Duration:) Type: _____ <input type="checkbox"/> Spit Sock (Duration:) <input type="checkbox"/> Pro-Strait Chair <input type="checkbox"/> Tactical Shield <input type="checkbox"/> WRAP <input type="checkbox"/> Less-Lethal Weapon System <input type="checkbox"/> PepperBall - OC Powder <input type="checkbox"/> PepperBall - Water <input type="checkbox"/> 37 mm Rifle - Standard <input type="checkbox"/> 37 mm Rifle - Low Energy <input type="checkbox"/> 40 mm Rifle - Bean Bag <input type="checkbox"/> 40 mm Rifle - Sponge <input type="checkbox"/> Taser - Probes <input type="checkbox"/> Taser - Drive Stuns <input type="checkbox"/> Stingball Grenade <input type="checkbox"/> Sound/Light device <input type="checkbox"/> 12-Gauge Super Sock <input type="checkbox"/> Ultron/NOVA Shield <input type="checkbox"/> REACT Belt <input type="checkbox"/> Firearm <input type="checkbox"/> Type: _____ <input type="checkbox"/> Other: _____				
WAS INITIAL USE OF FORCE EFFECTIVE? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No				
WAS ADDITIONAL CONTROL OR FORCE NEEDED? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
SUBJECT INJURED <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		EXTENT OF TREATMENT <input type="checkbox"/> None <input checked="" type="checkbox"/> Treated at hospital <input type="checkbox"/> Treated at scene <input type="checkbox"/> Hospitalized <input type="checkbox"/> Refused treatment		
OFFICER(S) INJURED <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		EXTENT OF TREATMENT <input checked="" type="checkbox"/> None <input type="checkbox"/> Treated at hospital <input type="checkbox"/> Treated at scene <input type="checkbox"/> Hospitalized <input type="checkbox"/> Refused treatment		
SUBJECT INJURY DESCRIPTION		OFFICER INJURY DESCRIPTION		
OTHER FORCE USED/COMMENTS/EQUIPMENT PERFORMANCE:				
SERGEANT		ARJIS	DATE	
LIEUTENANT		ARJIS	DATE	
CAPTAIN		ARJIS	DATE	

MARK
FIGURE TO
INDICATE
CONTACT
POINT(S)



San Diego County Sheriff's Department

Use of Force Supplemental

Use of Force Supplemental Instructions

Lines 1 & 3: Fill in the blanks.

Line 2: If the suspect was committing a crime and force was used to stop or apprehend the subject, document the appropriate penal code. If the UOF occurred in the performance of the officer's duties, document the incident description, i.e. officer transport, officer escort, making arrest, detaining suspect, cell extraction etc.

Primary Reason for Using Force: Check appropriate box(s).

Subject Appeared To Be: Check if applicable.

Number of Officers on Scene: List number of officers present.

Number of Officers Using Force: List number of officers that used force.

Level(s) of Resistance Encountered: Check appropriate box(s).

L.E. Tool/Technique Used: Check appropriate box(s). If known and/or applicable, include duration (approximate length of time) tool/technique was used. If known and/or applicable, include the number of contacts (approximate number of strikes, impacts, etc.) when requested on form.

Was Initial Use of Force Effective? If initial force used was effective, check "Yes." If initial force used was ineffective and additional force was necessary, check "No."

Was Additional Control or Force Needed: If initial force used was ineffective and additional force was necessary, check "Yes." If initial force used was effective, check "No."

Target Distance: If applicable (refers primarily to less lethal weapon systems), approximate distance or provide range (i.e. 7-15 feet, 15-20 yards, etc.) from subject during application of force.

Subject Injured: Check "Yes" if medically treated for injury sustained as a possible result of force applied by a officer(s) – does not include previous injuries suffered prior to officer contact. Check "No" if subject was not injured or simply complains of injury/pain suffered as a result of force applied by an officer(s) and refuses medical attention. Any complaints of pain shall be documented in the use of force report narrative (whenever any physical force used by a officer results in a complaint of injury or an injury that necessitates medical treatment of a subject, a supervisor will be notified immediately).

Extent of Treatment: Check appropriate box. Check none if subject was evaluated and no treatment was required. Specifically, check "Treated at Scene" if subject was treated at scene by EMS for injuries that may have resulted due to force applied by officer(s). Check "Treated at Hospital" if subject was transported to hospital for treatment of injuries that may have been sustained as an apparent result of force applied by officer(s). Check "Hospitalized" if subject was admitted to the Hospital as a result of injuries that were sustained as a result of force applied by officer(s).

Officer Injured: Check appropriate box (see above).

Extent of Treatment: Check appropriate box. Check none if officer was evaluated and no treatment was required. Specifically, check "Treated at Scene" if officer was treated at scene by EMS for injuries. Check "Treated at Hospital" if officer was transported to hospital for treatment of injuries. Check "Hospitalized" if officer was admitted to the Hospital as a result of injuries.

Other Force Used/Comments/Equipment Performance: This section can be used to document other force options not listed on the form; relevant comments about the incident such as complaints of pain/injury (room permitting) and negative/positive comments regarding equipment performance.

Mark Figure to Indicate Contact Points: When applicable, mark the areas on the figure where applied force contacted the subject's body.

Sergeant: Sign, list ARJIS number and date reviewed.

Lieutenant: Sign, list ARJIS number and date reviewed.

Captain: Sign, list ARJIS number and date reviewed.



San Diego County Sheriff's Department Officer Report

CAD Event No. **E4421100**Case No. **17147578**Report No. **66365****1**

Page 1 of 2

GENERAL CASE INFORMATION

Special Studies:		Related Cases:	
Location, City, State, ZIP: 451 Riverview Pkwy, Santee, CA 92071		Occurred On: 9/11/2017 3:50:00 PM (Monday)	
Jurisdiction: DETENTION FACILITY - LAS COLINAS WOMENS	Beat: 024	Call Source:	(and Between):

INDIVIDUAL/S

Name: Burrell, Kandrigua				Person Code:		Interpreter Language:	
Home Address, City, State, ZIP: Refused				Res. Country:		County Residence: N Nonresident	
Race: B		Sex: F		Date of Birth / Age: (b)(5)(A) - 19		Height: 5' 6"	
Weight: 130 lbs		Hair Color: BRO		Eye Color: BRO		Facial Hair:	
Complexion: DRK - Dark		Employment Status: U - Unemployed		Occupation/Grade:		Employer/School:	
Employer Address, City, State, ZIP:		Employer Address, City, State, ZIP:		Employer Address, City, State, ZIP:		Employer Address, City, State, ZIP:	

CONTACT INFORMATION**IDENTIFICATION:**

Type: JIM - JIMS Number	Number: (b)(5)(C)	State:	Country:
Type: CII - CII Number	Number: (b)(5)(C)	State:	Country:
Type: DLN - Drivers License Number	Number: (b)(5)(A)	State: CA - California	Country:
Type: BN - Booking Number	Number: 17116878	State:	Country:
Attire: jail greens	Injury: Yes	Extent Of Treatment: 3 - Treated at Hospital	Violent Crime Circumstances:
Subject Injury Description:			
Officer Injury Description:			

REPORT NARRATIVE**Origin:**

On 09/11/17, at approximately 1500 hours, I was assigned to work the House 5B Rover Position when I received radio transmission to respond to the tactical response room.

DEPUTY'S OBSERVATIONS AND ACTIONS:

Once in the tactical response room, I was briefed by Sergeant Hisquierdo (4644) we had assembled for the purpose of extracting and force medicating inmate Kandrigua Burrell BN 17116878. I was assigned as arrest and control, wearing helmet #2. The tactical team was informed Burrell had slipped off her waist chain and was banging the chains against the door. Burrell's ankles remained secured in leg chains.

The tactical team members were in place and ready outside Women's Psychiatric Security Unit (WPSU) cell #22. From behind the cell door, I heard Burrell yell, "Let's go, open up ! "

At approximately 1551 hours, the door was opened. I stood to the left side of the door with a tactical shield to protect ATL Corporal Santillanes (3160). After less lethal weapons were deployed, the tactical team made entry into the cell. Burrell was on her bunk covered in a green safety blanket. Burrell was thrashing her body and yelling. To gain control, I grasped her left ankle with both hands. I applied downward pressure with both hands using my body weight to stop her from kicking. I assisted in lowering Burrell to the floor by placing both of my hands under her left leg. Burrell was placed in a prone position. Burrell continued to thrash her body and kick her legs, so I continued to apply downward pressure with my hands and left knee onto her left lower leg.

Burrell was removed from the cell in order to place her on a gurney so she could be medicated. I assisted in lifting her onto the gurney by placing both of my hands under her left leg. As I placed Burrell's left leg on the gurney, she attempted to kick

Reporting Officer SH3454 - GOLDBERG, JENA	Division / Organization LCDR / LCDR - Las Colinas Detention and Re-Entry Facility	Reviewed By SH1068 - POIRIER, ALMA
Report Date 9/12/2017 9:18:17 AM	Detective Assigned	Reviewed Date 9/19/2017 10:59:05 AM



San Diego County Sheriff's Department Officer Report

CAD Event No. **E4421100**

Case No. **17147578**

Report No. **66365**

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me, but did not make contact. I applied downward pressure using my bodyweight with both hands to prevent Burrell from kicking. As Burrell was being secured on the gurney she began to yell, "I'm not moving no more," while she thrashed her body. Burrell still refused to give up her right hand to be handcuffed and held it under her body. I grasped onto Burrell's left hand with my left hand to enable Deputy Ponce (3040) to secure Burrell's left wrist in handcuffs. I continued to maintain downward pressure on Burrell's lower left leg with my right hand and right knee.

Once Burrell was secured on the gurney, the nurses medicated Burrell. Burrell's clothes were removed. I assisted by cutting and removing her pants. Burrell was covered in a safety blanket and wheeled to intake on the gurney.

Once the transporting deputies arrived, I assisted Burrell from the gurney and into the vehicle by holding her right shoulder with my left hand and her right elbow with my right hand. I secured the seatbelt around Burrell.

This concluded my contact with Burrell.

Reporting Officer SH3454 - GOLDBERG, JENA	Division / Organization LCDR / LCDR - Las Colinas Detention and Re-Entry Facility	Reviewed By SH1068 - POIRIER, ALMA
Report Date 9/12/2017 9:18:17 AM	Detective Assigned	Reviewed Date 9/19/2017 10:59:05 AM



San Diego County Sheriff's Department

Use of Force Supplemental

UFO DATE AND TIME 9/11/2017 15:50	EVENT NUMBER E4421100	CASE NUMBER 17147578	DOCUMENT NUMBER 66365	STATION/FACILITY LCDR - Las Colinas Detention and Re-Entry Facility
INCIDENT DESCRIPTION / OFFENSES Cell Extraction Burrell 17116878				
SUBJECT'S NAME (LAST, FIRST, MI) Burrell, Kandrigua		DATE OF BIRTH (b)(5)(A)	ARRESTED <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	SUPERVISOR PRESENT <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
DATE/TIME SUPERVISOR NOTIFIED 09/11/2017 15:50				
REASON(S) FOR USING FORCE: <input type="checkbox"/> Necessary to effect an arrest <input type="checkbox"/> Necessary to prevent a violent forcible felony <input type="checkbox"/> Delaying Jail Operations <input checked="" type="checkbox"/> Necessary to defend self or another <input checked="" type="checkbox"/> Necessary to restrain for subject's safety <input checked="" type="checkbox"/> Necessary to prevent escape/evasion <input checked="" type="checkbox"/> Necessary during high-risk incident <input type="checkbox"/> Necessary to effect a lawful detention <input type="checkbox"/> Necessary during riot				
SUBJECT APPEARED TO BE <input type="checkbox"/> Under the influence of alcohol and/or drugs <input checked="" type="checkbox"/> Mentally impaired		NUMBER OF OFFICERS ON SCENE 13		NUMBER OF OFFICERS USING FORCE 1
LEVEL(S) OF RESISTANCE ENCOUNTERED <input type="checkbox"/> NONE (subject cooperated/complied) <input type="checkbox"/> PSYCHOLOGICAL INTIMIDATION (non-verbal cues indicating subject's attitude or physical readiness to resist) <input type="checkbox"/> VERBAL NON-COMPLIANCE (subject's expressed unwillingness to comply with the officer's commands) <input type="checkbox"/> PASSIVE RESISTANCE (represents by a refusal to respond to verbal commands but also offers no form of physical resistance) <input checked="" type="checkbox"/> ACTIVE RESISTANCE (pushing, pulling or running away from the officer to avoid control; not attempting to harm the officer) <input checked="" type="checkbox"/> ASSAULTIVE BEHAVIOR (physical actions of assault) <input checked="" type="checkbox"/> AGGRAVATED ACTIVE AGGRESSION (potential injury or death)				
LAW ENFORCEMENT TOOL/TECHNIQUE USED TO GAIN COMPLIANCE OR OVERCOME RESISTANCE (CHECK ALL THAT APPLY)				
<input type="checkbox"/> Verbal Commands: <input checked="" type="checkbox"/> Empty Hand Control <input checked="" type="checkbox"/> Grab, Push, Pull, or Body Weight <input checked="" type="checkbox"/> Control Hold (Duration: 20 min) <input type="checkbox"/> Pressure Point (Duration:) (# of Contacts:) <input type="checkbox"/> Strike (Body part used:) (# of Contacts:) <input type="checkbox"/> Takedown Type: _____ <input type="checkbox"/> Carotid (Rendered Unconscious? <input type="checkbox"/> Yes <input type="checkbox"/> No) (Duration:) <input type="checkbox"/> Tool/Device/Weapon <input type="checkbox"/> OC Agent (Duration:) (# of Contacts:) <input type="checkbox"/> Decontaminated <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Cord Cuff Restraint Device (Duration:) <input type="checkbox"/> Impact Weapon (# of Contacts:) Type: _____ <input type="checkbox"/> Canine (Duration:) (# of Contacts:) <input type="checkbox"/> Vehicle/Forcible Stop <input type="checkbox"/> Weapon Pointed at Subject (Duration:) Type: _____ <input type="checkbox"/> Spit Sock (Duration:) <input type="checkbox"/> Pro-Strait Chair <input type="checkbox"/> Tactical Shield <input type="checkbox"/> WRAP <input type="checkbox"/> Less-Lethal Weapon System <input type="checkbox"/> PepperBall - OC Powder <input type="checkbox"/> PepperBall - Water <input type="checkbox"/> 37 mm Rifle - Standard <input type="checkbox"/> 37 mm Rifle - Low Energy <input type="checkbox"/> 40 mm Rifle - Bean Bag <input type="checkbox"/> 40 mm Rifle - Sponge <input type="checkbox"/> Taser - Probes <input type="checkbox"/> Taser - Drive Stuns <input type="checkbox"/> Stingball Grenade <input type="checkbox"/> Sound/Light device <input type="checkbox"/> 12-Gauge Super Sock <input type="checkbox"/> Ultron/NOVA Shield <input type="checkbox"/> REACT Belt <input type="checkbox"/> Firearm <input type="checkbox"/> Type: _____ <input type="checkbox"/> Other: _____				
WAS INITIAL USE OF FORCE EFFECTIVE? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
WAS ADDITIONAL CONTROL OR FORCE NEEDED? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No				
SUBJECT INJURED <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		EXTENT OF TREATMENT <input type="checkbox"/> None <input checked="" type="checkbox"/> Treated at hospital <input type="checkbox"/> Treated at scene <input type="checkbox"/> Hospitalized <input type="checkbox"/> Refused treatment		
OFFICER(S) INJURED <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		EXTENT OF TREATMENT <input checked="" type="checkbox"/> None <input type="checkbox"/> Treated at hospital <input type="checkbox"/> Treated at scene <input type="checkbox"/> Hospitalized <input type="checkbox"/> Refused treatment		
SUBJECT INJURY DESCRIPTION		OFFICER INJURY DESCRIPTION		
OTHER FORCE USED/COMMENTS/EQUIPMENT PERFORMANCE: Cut and removed pants				
SERGEANT		ARJIS	DATE	
LIEUTENANT		ARJIS	DATE	
CAPTAIN		ARJIS	DATE	



San Diego County Sheriff's Department

Use of Force Supplemental

Use of Force Supplemental Instructions

Lines 1 & 3: Fill in the blanks.

Line 2: If the suspect was committing a crime and force was used to stop or apprehend the subject, document the appropriate penal code. If the UOF occurred in the performance of the officer's duties, document the incident description, i.e. officer transport, officer escort, making arrest, detaining suspect, cell extraction etc.

Primary Reason for Using Force: Check appropriate box(s).

Subject Appeared To Be: Check if applicable.

Number of Officers on Scene: List number of officers present.

Number of Officers Using Force: List number of officers that used force.

Level(s) of Resistance Encountered: Check appropriate box(s).

L.E. Tool/Technique Used: Check appropriate box(s). If known and/or applicable, include duration (approximate length of time) tool/technique was used. If known and/or applicable, include the number of contacts (approximate number of strikes, impacts, etc.) when requested on form.

Was Initial Use of Force Effective? If initial force used was effective, check "Yes." If initial force used was ineffective and additional force was necessary, check "No."

Was Additional Control or Force Needed: If initial force used was ineffective and additional force was necessary, check "Yes." If initial force used was effective, check "No."

Target Distance: If applicable (refers primarily to less lethal weapon systems), approximate distance or provide range (i.e. 7-15 feet, 15-20 yards, etc.) from subject during application of force.

Subject Injured: Check "Yes" if medically treated for injury sustained as a possible result of force applied by a officer(s) – does not include previous injuries suffered prior to officer contact. Check "No" if subject was not injured or simply complains of injury/pain suffered as a result of force applied by an officer(s) and refuses medical attention. Any complaints of pain shall be documented in the use of force report narrative (whenever any physical force used by a officer results in a complaint of injury or an injury that necessitates medical treatment of a subject, a supervisor will be notified immediately).

Extent of Treatment: Check appropriate box. Check none if subject was evaluated and no treatment was required. Specifically, check "Treated at Scene" if subject was treated at scene by EMS for injuries that may have resulted due to force applied by officer(s). Check "Treated at Hospital" if subject was transported to hospital for treatment of injuries that may have been sustained as an apparent result of force applied by officer(s). Check "Hospitalized" if subject was admitted to the Hospital as a result of injuries that were sustained as a result of force applied by officer(s).

Officer Injured: Check appropriate box (see above).

Extent of Treatment: Check appropriate box. Check none if officer was evaluated and no treatment was required. Specifically, check "Treated at Scene" if officer was treated at scene by EMS for injuries. Check "Treated at Hospital" if officer was transported to hospital for treatment of injuries. Check "Hospitalized" if officer was admitted to the Hospital as a result of injuries.

Other Force Used/Comments/Equipment Performance: This section can be used to document other force options not listed on the form; relevant comments about the incident such as complaints of pain/injury (room permitting) and negative/positive comments regarding equipment performance.

Mark Figure to Indicate Contact Points: When applicable, mark the areas on the figure where applied force contacted the subject's body.

Sergeant: Sign, list ARJIS number and date reviewed.

Lieutenant: Sign, list ARJIS number and date reviewed.

Captain: Sign, list ARJIS number and date reviewed.



San Diego County Sheriff's Department Officer Report

CAD Event No. **E4421100**Case No. **17147578**Report No. **66372****1**

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GENERAL CASE INFORMATION

Special Studies:		Related Cases:	
Location, City, State, ZIP: 451 Riverview Pkwy,		Occurred On: 9/11/2017 3:50:00 PM (Monday)	
Jurisdiction: DETENTION FACILITY - LAS COLINAS WOMENS	Beat: 024	Call Source:	(and Between):

INDIVIDUAL/S

Name: Burrell, Kandrigua				Person Code:		Interpreter Language:		
ALIAS / AKA / NICKNAME / MONIKER:								
Name Type: Alias/AKA	First: Kavricia	Middle:	Last: McKoy	Suffix:				
Name Type: Alias/AKA	First: Kalani	Middle:	Last: Williams	Suffix:				
Home Address, City, State, ZIP:		Res. Country:		County Residence: N Nonresident		Undocumented:		
Race: B	Sex: F	Date of Birth / Age: (b)(5)(A) - 19	Height: 5' 6"	Weight: 130 lbs	Hair Color: BLK	Eye Color: BRO	Facial Hair: 12 - None/Fuzz	Complexion: DBR - Dark Brown
Employment Status: U - Unemployed		Occupation/Grade:	Employer/School:		Employer Address, City, State, ZIP:			

**CONTACT INFORMATION
IDENTIFICATION:**

Type: DLN - Drivers License Number	Number: (b)(5)(A)	State:	Country:		
Type: CII - CII Number	Number: (b)(5)(C)	State:	Country:		
Type: FBI - FBI No.	Number: (b)(5)(C)	State:	Country:		
Type: BN - Booking Number	Number: 17116878	State:	Country:		
Type: JIM - JIMS Number	Number: (b)(5)(C)	State:	Country:		
Attire: Jail Issued Green Clothing		Injury: Yes	Extent Of Treatment: 3 - Treated at Hospital	Violent Crime Circumstances:	
Subject Injury Description:					
Officer Injury Description:					

REPORT NARRATIVECase # 17147578
Event # E4421100**ORIGIN:**

On 09/11/2017, I was assigned to the 1D Housing Deputy position at the Las Colinas Detention Reentry (LCDRF). At approximately 1500 hours, I was assigned to the Tactical Team position of arrest and control (helmet #5) for the purpose of extracting inmate Kandrigua Burrell BN17116878 in the Women's Psychiatric Security Unit (Cell 22).

DEPUTY'S OBSERVATIONS AND ACTIONS:

The Tactical Team was briefed by Sergeant Hisquierdo (4644) Burrell refused to allow the waist and leg chains to be removed. Burrell had slid out of the waist chains and was hitting the cell door with the chains.

The Tactical Team arrived outside of Burrell assigned Cell #22 in the WPSU.

Once all Tactical Team members were in place and ready, Assistant Team Leader (ATL) Corporal Santillanes (3160) signaled for the cell door to be released. The cell door was opened and Corporal Ostberg (7590) and Deputy Cazarez (2691) gave Burrell verbal commands get on her stomach.

Reporting Officer SH9011 - JOSEIF, JANELLE	Division / Organization LCDR / LCDR - Las Colinas Detention and Re-Entry Facility	Reviewed By SH1068 - POIRIER, ALMA
Report Date 9/12/2017 12:34:25 PM	Detective Assigned	Reviewed Date 9/19/2017 10:54:24 AM



San Diego County Sheriff's Department Officer Report

CAD Event No. **E4421100**

Case No. **17147578**

Report No. **66372**

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I heard the firing of the less lethal weapons with commands by Corporal Ostberg and Deputy Cazarez for Burrell to get on the ground.

Burrell did not comply with the instructions given to her. Corporal Ostberg informed the Tactical Team Burrell had laid down on her bed and put her blanket over her.

The Tactical Team was given the command to enter the cell. The Tactical Team entered the cell to place Burrell into the prone position. I assisted the Tactical Team in lifting Burrell off the bed and placing her on the cell floor using both my hands to support her right shoulder.

Burrell grabbed Deputy Ponce's (3040) hand and I heard Deputy Ponce say, "Let go of me!" I pulled Burrell's left hand back to release her grasp on Deputy Ponce's hand. I instructed Burrell to "Let go of her hand!" Burrell let go of Deputy Ponce's hand and was attempting to bite Deputy Ponce. I kneeled down and placed my shins on the back of Burrell's head, while applying moderate downward pressure, to prevent her from biting anyone. This was not successful since Burrell bit my right hand, causing me pain. I instructed Burrell, "Don't bite my hand!" I struck Burrell with three closed fists on her head to prevent her from biting again, which was successful. I placed my hands on the back of Burrell's head and applied downward pressure to prevent her from lifting her head and potentially biting anyone else.

I assisted in sliding Burrell out of the cell. Outside the cell, I placed my left knee and shin on Burrell's backside to prevent her from lifting her body. I placed my hands on the back of Burrell's head to prevent her from lifting her head and potentially biting anyone else. I was successful with these efforts. I assisted with lifting Burrell onto the gurney. Burrell began aggressively thrashing her body from side to side. I placed my left arm and elbow on Burrell's upper back and my right hand on the back of her head to prevent her from lifting it or thrashing around. This was unsuccessful since Burrell was still able to move around. I placed my left knee and shin on Burrell's upper back to further immobilize her. I was successful with this additional effort. I assisted with securing a gurney strap then resumed my control hold on Burrell.

When she was being transitioned to hand cuffs, Burrell began aggressively thrashing her body from side to side again. I could hear Corporal Santillanes giving Burrell instructions to stop resisting. Burrell did not stop moving around, attempting to break our grips. I attempted to gain compliance by applying the infraorbital pressure point on Burrell. I was unsuccessful with this pressure point since Burrell bit my fingers. I struck Burrell's face with three closed hand strikes. I gave Burrell commands not to bite my fingers. I resumed control of Burrell's head by applying downward pressure with both of my hands. I held my control hold until the gurney was raised. I released the pressure but maintained control of the head.

Medical evaluated Burrell. It was determined Burrell would be transported to the hospital for further medical treatment. Burrell was wheeled to the Intake area on the gurney. I assisted in placing Burrell into the transporting vehicle.

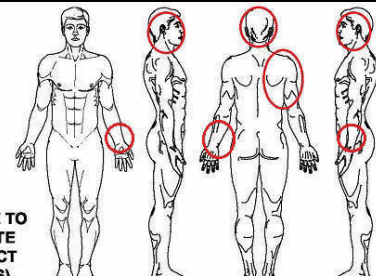
The car door was secured and I ended my contact with Burrell.

Reporting Officer SH9011 - JOSEIF, JANELLE	Division / Organization LCDR / LCDR - Las Colinas Detention and Re-Entry Facility	Reviewed By SH1068 - POIRIER, ALMA
Report Date 9/12/2017 12:34:25 PM	Detective Assigned	Reviewed Date 9/19/2017 10:54:24 AM



San Diego County Sheriff's Department

Use of Force Supplemental

UFO DATE AND TIME 9/11/2017 15:50	EVENT NUMBER E4421100	CASE NUMBER 17147578	DOCUMENT NUMBER 66372	STATION/FACILITY LCDR - Las Colinas Detention and Re-Entry Facility
INCIDENT DESCRIPTION / OFFENSES Cell Extraction / Burrell BN17116878				
SUBJECT'S NAME (LAST, FIRST, MI) Burrell, Kandrigua		DATE OF BIRTH (b)(5)(A)	ARRESTED <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	SUPERVISOR PRESENT <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
DATE/TIME SUPERVISOR NOTIFIED 09/11/2017 15:50				
REASON(S) FOR USING FORCE: <input type="checkbox"/> Necessary to effect an arrest <input type="checkbox"/> Necessary to prevent a violent forcible felony <input type="checkbox"/> Delaying Jail Operations <input type="checkbox"/> Necessary to defend self or another <input checked="" type="checkbox"/> Necessary to restrain for subject's safety <input checked="" type="checkbox"/> Necessary to prevent escape/evasion <input checked="" type="checkbox"/> Necessary during high-risk incident <input type="checkbox"/> Necessary to effect a lawful detention <input type="checkbox"/> Necessary during riot				
SUBJECT APPEARED TO BE <input type="checkbox"/> Under the influence of alcohol and/or drugs <input checked="" type="checkbox"/> Mentally impaired		NUMBER OF OFFICERS ON SCENE 13		NUMBER OF OFFICERS USING FORCE 1
LEVEL(S) OF RESISTANCE ENCOUNTERED <input type="checkbox"/> NONE (subject cooperated/complied) <input type="checkbox"/> PSYCHOLOGICAL INTIMIDATION (non-verbal cues indicating subject's attitude or physical readiness to resist) <input type="checkbox"/> VERBAL NON-COMPLIANCE (subject's expressed unwillingness to comply with the officer's commands) <input type="checkbox"/> PASSIVE RESISTANCE (represents by a refusal to respond to verbal commands but also offers no form of physical resistance) <input checked="" type="checkbox"/> ACTIVE RESISTANCE (pushing, pulling or running away from the officer to avoid control; not attempting to harm the officer) <input checked="" type="checkbox"/> ASSAULTIVE BEHAVIOR (physical actions of assault) <input checked="" type="checkbox"/> AGGRAVATED ACTIVE AGGRESSION (potential injury or death)				
LAW ENFORCEMENT TOOL/TECHNIQUE USED TO GAIN COMPLIANCE OR OVERCOME RESISTANCE (CHECK ALL THAT APPLY) <input checked="" type="checkbox"/> Verbal Commands: "Let go of her" "Don't bite me" "Give me your hand" <input checked="" type="checkbox"/> Empty Hand Control <input checked="" type="checkbox"/> Grab, Push, Pull, or Body Weight <input type="checkbox"/> Control Hold (Duration:) <input type="checkbox"/> Pressure Point (Duration:) (# of Contacts:) <input checked="" type="checkbox"/> Strike (Body part used: Head/Face) (# of Contacts: 6) <input type="checkbox"/> Takedown Type: _____ <input type="checkbox"/> Carotid (Rendered Unconscious? <input type="checkbox"/> Yes <input type="checkbox"/> No) (Duration:) <input type="checkbox"/> Tool/Device/Weapon <input type="checkbox"/> OC Agent (Duration:) (# of Contacts:) <input type="checkbox"/> Decontaminated <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Cord Cuff Restraint Device (Duration:) <input type="checkbox"/> Impact Weapon (# of Contacts:) Type: _____ <input type="checkbox"/> Canine (Duration:) (# of Contacts:) <input type="checkbox"/> Vehicle/Forcible Stop <input type="checkbox"/> Weapon Pointed at Subject (Duration:) Type: _____ <input type="checkbox"/> Spit Sock (Duration:) <input type="checkbox"/> Pro-Strait Chair <input type="checkbox"/> Tactical Shield <input type="checkbox"/> WRAP <input type="checkbox"/> Less-Lethal Weapon System <input type="checkbox"/> PepperBall - OC Powder <input type="checkbox"/> PepperBall - Water <input type="checkbox"/> 37 mm Rifle - Standard <input type="checkbox"/> 37 mm Rifle - Low Energy <input type="checkbox"/> 40 mm Rifle - Bean Bag <input type="checkbox"/> 40 mm Rifle - Sponge <input type="checkbox"/> Taser - Probes <input type="checkbox"/> Taser - Drive Stuns <input type="checkbox"/> Stingball Grenade <input type="checkbox"/> Sound/Light device <input type="checkbox"/> 12-Gauge Super Sock <input type="checkbox"/> Ultron/NOVA Shield <input type="checkbox"/> REACT Belt <input type="checkbox"/> Firearm <input type="checkbox"/> Type: _____ <input type="checkbox"/> Other: _____				
WAS INITIAL USE OF FORCE EFFECTIVE? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		WAS ADDITIONAL CONTROL OR FORCE NEEDED? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
SUBJECT INJURED <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		EXTENT OF TREATMENT <input type="checkbox"/> None <input checked="" type="checkbox"/> Treated at hospital <input type="checkbox"/> Treated at scene <input type="checkbox"/> Hospitalized <input type="checkbox"/> Refused treatment		
OFFICER(S) INJURED <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		EXTENT OF TREATMENT <input checked="" type="checkbox"/> None <input type="checkbox"/> Treated at hospital <input type="checkbox"/> Treated at scene <input type="checkbox"/> Hospitalized <input type="checkbox"/> Refused treatment		
SUBJECT INJURY DESCRIPTION		OFFICER INJURY DESCRIPTION		
OTHER FORCE USED/COMMENTS/EQUIPMENT PERFORMANCE:				
SERGEANT		ARJIS	DATE	
LIEUTENANT		ARJIS	DATE	
CAPTAIN		ARJIS	DATE	
 MARK FIGURE TO INDICATE CONTACT POINT(S)				



San Diego County Sheriff's Department

Use of Force Supplemental

Use of Force Supplemental Instructions

Lines 1 & 3: Fill in the blanks.

Line 2: If the suspect was committing a crime and force was used to stop or apprehend the subject, document the appropriate penal code. If the UOF occurred in the performance of the officer's duties, document the incident description, i.e. officer transport, officer escort, making arrest, detaining suspect, cell extraction etc.

Primary Reason for Using Force: Check appropriate box(s).

Subject Appeared To Be: Check if applicable.

Number of Officers on Scene: List number of officers present.

Number of Officers Using Force: List number of officers that used force.

Level(s) of Resistance Encountered: Check appropriate box(s).

L.E. Tool/Technique Used: Check appropriate box(s). If known and/or applicable, include duration (approximate length of time) tool/technique was used. If known and/or applicable, include the number of contacts (approximate number of strikes, impacts, etc.) when requested on form.

Was Initial Use of Force Effective? If initial force used was effective, check "Yes." If initial force used was ineffective and additional force was necessary, check "No."

Was Additional Control or Force Needed: If initial force used was ineffective and additional force was necessary, check "Yes." If initial force used was effective, check "No."

Target Distance: If applicable (refers primarily to less lethal weapon systems), approximate distance or provide range (i.e. 7-15 feet, 15-20 yards, etc.) from subject during application of force.

Subject Injured: Check "Yes" if medically treated for injury sustained as a possible result of force applied by a officer(s) – does not include previous injuries suffered prior to officer contact. Check "No" if subject was not injured or simply complains of injury/pain suffered as a result of force applied by an officer(s) and refuses medical attention. Any complaints of pain shall be documented in the use of force report narrative (whenever any physical force used by a officer results in a complaint of injury or an injury that necessitates medical treatment of a subject, a supervisor will be notified immediately).

Extent of Treatment: Check appropriate box. Check none if subject was evaluated and no treatment was required. Specifically, check "Treated at Scene" if subject was treated at scene by EMS for injuries that may have resulted due to force applied by officer(s). Check "Treated at Hospital" if subject was transported to hospital for treatment of injuries that may have been sustained as an apparent result of force applied by officer(s). Check "Hospitalized" if subject was admitted to the Hospital as a result of injuries that were sustained as a result of force applied by officer(s).

Officer Injured: Check appropriate box (see above).

Extent of Treatment: Check appropriate box. Check none if officer was evaluated and no treatment was required. Specifically, check "Treated at Scene" if officer was treated at scene by EMS for injuries. Check "Treated at Hospital" if officer was transported to hospital for treatment of injuries. Check "Hospitalized" if officer was admitted to the Hospital as a result of injuries.

Other Force Used/Comments/Equipment Performance: This section can be used to document other force options not listed on the form; relevant comments about the incident such as complaints of pain/injury (room permitting) and negative/positive comments regarding equipment performance.

Mark Figure to Indicate Contact Points: When applicable, mark the areas on the figure where applied force contacted the subject's body.

Sergeant: Sign, list ARJIS number and date reviewed.

Lieutenant: Sign, list ARJIS number and date reviewed.

Captain: Sign, list ARJIS number and date reviewed.



San Diego County Sheriff's Department Officer Report

CAD Event No. **E4421100**Case No. **17147578**Report No. **66371****1**

Page 1 of 2

GENERAL CASE INFORMATION

Special Studies:		Related Cases:	
Location, City, State, ZIP: 451 Riverview Parkway, Santee, CA 92071		Occurred On: 9/11/2007 3:50:00 PM (Tuesday)	
Jurisdiction: DETENTION FACILITY - LAS COLINAS WOMENS	Beat: 024	Call Source:	(and Between):

INDIVIDUAL/S

Name: Burrell, Kandrigua				Person Code:		Interpreter Language:		
ALIAS / AKA / NICKNAME / MONIKER:								
Name Type: Alias/AKA	First: Kavricia	Middle:	Last: McKoy	Suffix:				
Name Type: Alias/AKA	First: Kalani	Middle:	Last: Williams	Suffix:				
Home Address, City, State, ZIP:		Res. Country:		County Residence:		Undocumented:		
Race: B	Sex: F	Date of Birth / Age: (b)(5)(A) - 19	Height: 5' 6"	Weight: 130 lbs	Hair Color: BLK	Eye Color: BRO	Facial Hair: 12 - None/Fuzz	Complexion:
Employment Status:		Occupation/Grade:		Employer/School:		Employer Address, City, State, ZIP:		

CONTACT INFORMATION**IDENTIFICATION:**

Type: DLN - Drivers License Number	Number: (b)(5)(A)	State: CA - California	Country:	
Type: CII - CII Number	Number: (b)(5)(C)	State:	Country:	
Attire: Jail Issued Greens		Injury: Yes	Extent Of Treatment: 3 - Treated at Hospital	Violent Crime Circumstances:
Subject Injury Description:				
Officer Injury Description:				

REPORT NARRATIVE**ORIGIN:**

On 09/11/2017, I was assigned to the Perimeter Deputy Position at the Las Colinas Detention and Re-Entry Facility (LCDRF). At approximately 1500 hours, I was notified by Assistant Tactical Leader (ATL) Corporal Santillanes #3160 to respond to the tactical response room.

DEPUTY OBSERVATIONS AND ACTIONS:**BACKGROUND:**

I was assigned helmet #13 for the tactical mission and assigned to the gunner (40 mm Launcher) position.

A plan was formulated to utilize the "Hot Stop" extraction method. This extraction method was utilized because of the substantial risk of bodily injury to deputies because Inmate Kandrigua Burrell #17116878 was using a set of waist chains as a weapon.

DEPUTY OBSERVATIONS AND ACTIONS CONTINUED:

Reporting Officer SH7590 - OSTBERG, MAX	Division / Organization LCDR / LCDR - Las Colinas Detention and Re-Entry Facility	Reviewed By SH1068 - POIRIER, ALMA
Report Date 9/12/2017 12:26:13 PM	Detective Assigned	Reviewed Date 9/19/2017 11:24:45 AM



San Diego County Sheriff's Department Officer Report

CAD Event No. **E4421100**

Case No. **17147578**

Report No. **66371**

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The Tactical Team (Tac-Team) quietly entered the B-side dayroom of the Psychiatric Security Unit (PSU). Corporal Santillanes #3160 attached a tactical lead to the door of cell #22 and stood approximately 5 feet to the left of the door with Deputy Goldberg #3454. Approximately 5 feet to the right of the cell door were Deputies Soria #3530, Ponce #3040, Carter #3436, and Joseif #9011. Deputy Cazarez #2691 and I were standing approximately 16 feet away directly in front of cell #22.

When the Tac-Team was ready, cell #22 was opened using the PSU touchscreen and Corporal Santillanes used the tactical lead to pull the door open more rapidly. I raised my 40 mm launcher and acquired Burrell in my weapon's sights in case she tried to charge out of the cell without instruction. Burrell was holding up a mattress in a way to protect herself from any projectiles deployed from the Tac-Team. Deputy Cazarez immediately began giving orders to Burrell to, "Get on the ground!" after multiple orders and Burrell not complying; Deputy Cazarez deployed a less lethal bean bag round. Burrell dropped the mattress and retreated towards the cell's bunk area.

Burrell was now sitting on the bunk covering herself with a green safety blanket, not moving. I told Deputy Cazarez that I would assume control of the situation and now utilize the 40 mm launcher instead of the less lethal shotgun.

I immediately began ordering Burrell to get down on the ground. Instead, Burrell got up with the blanket still wrapped around her, and began moving towards the cell toilet. Prior to the Tac-Team's arrival, Burrell was throwing an unknown liquid out from underneath the cell door. In order to prevent Burrell from reaching the toilet area and to enforce my order to get on the ground, I deployed a 40 mm round which made contact with Burrell's right foot. Burrell immediately stopped her progress towards the toilet and again retreated back to the bunk area where she laid down and said, "I'm done."

At this point, I believed Burrell was no longer going to move regardless if I deployed more 40 mm rounds at her. Instead, I relayed to the Tac-Team Burrell's current position and what she was doing. I signaled the Tac-Team to enter and secure Burrell.

Once Burrell was secured, she was removed from the cell and placed onto a gurney. I assisted in applying the seatbelt restrains across Burrell's thigh area. Burrell offered no resistance.

Deputy Soria was attempting to get Burrell's right hand behind her back but was struggling to do so. Together, Deputy Soria and I pulled Burrell's right arm and hand out from underneath her stomach, and placed it behind her back to be handcuffed.

After medication was administered, the Tac-Team began to take Burrell's jail issued green clothing off. At this point, I was instructed by Lt. Gonzales #0707 to leave the scene.

Deputy Cazarez, Deputy Hardwick and I transported Burrell to Grossmont hospital to be treated for her injuries. No force was used during the transport.

Reporting Officer SH7590 - OSTBERG, MAX	Division / Organization LCDR / LCDR - Las Colinas Detention and Re-Entry Facility	Reviewed By SH1068 - POIRIER, ALMA
Report Date 9/12/2017 12:26:13 PM	Detective Assigned	Reviewed Date 9/19/2017 11:24:45 AM



San Diego County Sheriff's Department

Use of Force Supplemental

UFO DATE AND TIME 9/11/2007 15:50	EVENT NUMBER E4421100	CASE NUMBER 17147578	DOCUMENT NUMBER 66371	STATION/FACILITY LCDR - Las Colinas Detention and Re-Entry Facility																																	
INCIDENT DESCRIPTION / OFFENSES Cell Extraction Burrell BN17129506																																					
SUBJECT'S NAME (LAST, FIRST, MI) Burrell, Kandrigua		DATE OF BIRTH (b)(5)(A)	ARRESTED <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	SUPERVISOR PRESENT <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No																																	
DATE/TIME SUPERVISOR NOTIFIED 09/11/2017 15:50																																					
REASON(S) FOR USING FORCE: <input type="checkbox"/> Necessary to effect an arrest <input type="checkbox"/> Necessary to prevent a violent forcible felony <input type="checkbox"/> Delaying Jail Operations <input checked="" type="checkbox"/> Necessary to defend self or another <input type="checkbox"/> Necessary to restrain for subject's safety <input checked="" type="checkbox"/> Necessary to prevent escape/evasion <input checked="" type="checkbox"/> Necessary during high-risk incident <input type="checkbox"/> Necessary to effect a lawful detention <input type="checkbox"/> Necessary during riot																																					
SUBJECT APPEARED TO BE <input type="checkbox"/> Under the influence of alcohol and/or drugs <input checked="" type="checkbox"/> Mentally impaired		NUMBER OF OFFICERS ON SCENE 13		NUMBER OF OFFICERS USING FORCE 1																																	
LEVEL(S) OF RESISTANCE ENCOUNTERED <input type="checkbox"/> NONE (subject cooperated/complied) <input checked="" type="checkbox"/> PSYCHOLOGICAL INTIMIDATION (non-verbal cues indicating subject's attitude or physical readiness to resist) <input checked="" type="checkbox"/> VERBAL NON-COMPLIANCE (subject's expressed unwillingness to comply with the officer's commands) <input checked="" type="checkbox"/> PASSIVE RESISTANCE (represents by a refusal to respond to verbal commands but also offers no form of physical resistance) <input checked="" type="checkbox"/> ACTIVE RESISTANCE (pushing, pulling or running away from the officer to avoid control; not attempting to harm the officer) <input checked="" type="checkbox"/> ASSAULTIVE BEHAVIOR (physical actions of assault) <input checked="" type="checkbox"/> AGGRAVATED ACTIVE AGGRESSION (potential injury or death)																																					
LAW ENFORCEMENT TOOL/TECHNIQUE USED TO GAIN COMPLIANCE OR OVERCOME RESISTANCE (CHECK ALL THAT APPLY)																																					
<input checked="" type="checkbox"/> Verbal Commands: "Get down on the ground." "Get off of your bunk."																																					
<input checked="" type="checkbox"/> Empty Hand Control <input checked="" type="checkbox"/> Grab, Push, Pull, or Body Weight <input type="checkbox"/> Control Hold (Duration:) <input type="checkbox"/> Pressure Point (Duration:) (# of Contacts:) <input type="checkbox"/> Strike (Body part used:) (# of Contacts:) <input type="checkbox"/> Takedown Type: _____ <input type="checkbox"/> Carotid (Rendered Unconscious? <input type="checkbox"/> Yes <input type="checkbox"/> No) (Duration:)																																					
<input type="checkbox"/> Tool/Device/Weapon <input type="checkbox"/> OC Agent (Duration:) (# of Contacts:) <input type="checkbox"/> Decontaminated <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Cord Cuff Restraint Device (Duration:) <input type="checkbox"/> Impact Weapon (# of Contacts:) Type: _____ <input type="checkbox"/> Canine (Duration:) (# of Contacts:) <input type="checkbox"/> Vehicle/Forcible Stop <input type="checkbox"/> Weapon Pointed at Subject (Duration:) Type: _____ <input type="checkbox"/> Spit Sock (Duration:) <input type="checkbox"/> Pro-Straint Chair <input type="checkbox"/> Tactical Shield <input type="checkbox"/> WRAP																																					
<input checked="" type="checkbox"/> Less-Lethal Weapon System <input type="checkbox"/> PepperBall - OC Powder <input type="checkbox"/> PepperBall - Water <input type="checkbox"/> 37 mm Rifle - Standard <input type="checkbox"/> 37 mm Rifle - Low Energy <input type="checkbox"/> 40 mm Rifle - Bean Bag <input checked="" type="checkbox"/> 40 mm Rifle - Sponge <input type="checkbox"/> Taser - Probes <input type="checkbox"/> Taser - Drive Stuns <input type="checkbox"/> Stingball Grenade <input type="checkbox"/> Sound/Light device <input type="checkbox"/> 12-Gauge Super Sock <input type="checkbox"/> Ultron/NOVA Shield <input type="checkbox"/> REACT Belt																																					
<input type="checkbox"/> Firearm <input type="checkbox"/> Type: _____																																					
<input type="checkbox"/> Other: _____																																					
<table border="1"><thead><tr><th>Discharges</th><th>Number of</th><th>Target</th></tr></thead><tbody><tr><td>1</td><td>1</td><td>15 to 20</td></tr><tr><td> </td><td> </td><td> </td></tr><tr><td> </td><td> </td><td> </td></tr><tr><td> </td><td> </td><td> </td></tr><tr><td> </td><td> </td><td> </td></tr><tr><td> </td><td> </td><td> </td></tr><tr><td> </td><td> </td><td> </td></tr><tr><td> </td><td> </td><td> </td></tr><tr><td> </td><td> </td><td> </td></tr><tr><td> </td><td> </td><td> </td></tr></tbody></table>					Discharges	Number of	Target	1	1	15 to 20																											
Discharges	Number of	Target																																			
1	1	15 to 20																																			
WAS INITIAL USE OF FORCE EFFECTIVE? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No																																					
WAS ADDITIONAL CONTROL OR FORCE NEEDED? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No																																					
SUBJECT INJURED <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		EXTENT OF TREATMENT <input type="checkbox"/> None <input checked="" type="checkbox"/> Treated at hospital <input type="checkbox"/> Treated at scene <input type="checkbox"/> Hospitalized <input type="checkbox"/> Refused treatment																																			
OFFICER(S) INJURED <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		EXTENT OF TREATMENT <input checked="" type="checkbox"/> None <input type="checkbox"/> Treated at hospital <input type="checkbox"/> Treated at scene <input type="checkbox"/> Hospitalized <input type="checkbox"/> Refused treatment																																			
SUBJECT INJURY DESCRIPTION		OFFICER INJURY DESCRIPTION																																			
OTHER FORCE USED/COMMENTS/EQUIPMENT PERFORMANCE:																																					
SERGEANT		ARJIS	DATE																																		
LIEUTENANT		ARJIS	DATE																																		
CAPTAIN		ARJIS	DATE																																		



San Diego County Sheriff's Department

Use of Force Supplemental

Use of Force Supplemental Instructions

Lines 1 & 3: Fill in the blanks.

Line 2: If the suspect was committing a crime and force was used to stop or apprehend the subject, document the appropriate penal code. If the UOF occurred in the performance of the officer's duties, document the incident description, i.e. officer transport, officer escort, making arrest, detaining suspect, cell extraction etc.

Primary Reason for Using Force: Check appropriate box(s).

Subject Appeared To Be: Check if applicable.

Number of Officers on Scene: List number of officers present.

Number of Officers Using Force: List number of officers that used force.

Level(s) of Resistance Encountered: Check appropriate box(s).

L.E. Tool/Technique Used: Check appropriate box(s). If known and/or applicable, include duration (approximate length of time) tool/technique was used. If known and/or applicable, include the number of contacts (approximate number of strikes, impacts, etc.) when requested on form.

Was Initial Use of Force Effective? If initial force used was effective, check "Yes." If initial force used was ineffective and additional force was necessary, check "No."

Was Additional Control or Force Needed: If initial force used was ineffective and additional force was necessary, check "Yes." If initial force used was effective, check "No."

Target Distance: If applicable (refers primarily to less lethal weapon systems), approximate distance or provide range (i.e. 7-15 feet, 15-20 yards, etc.) from subject during application of force.

Subject Injured: Check "Yes" if medically treated for injury sustained as a possible result of force applied by a officer(s) – does not include previous injuries suffered prior to officer contact. Check "No" if subject was not injured or simply complains of injury/pain suffered as a result of force applied by an officer(s) and refuses medical attention. Any complaints of pain shall be documented in the use of force report narrative (whenever any physical force used by a officer results in a complaint of injury or an injury that necessitates medical treatment of a subject, a supervisor will be notified immediately).

Extent of Treatment: Check appropriate box. Check none if subject was evaluated and no treatment was required. Specifically, check "Treated at Scene" if subject was treated at scene by EMS for injuries that may have resulted due to force applied by officer(s). Check "Treated at Hospital" if subject was transported to hospital for treatment of injuries that may have been sustained as an apparent result of force applied by officer(s). Check "Hospitalized" if subject was admitted to the Hospital as a result of injuries that were sustained as a result of force applied by officer(s).

Officer Injured: Check appropriate box (see above).

Extent of Treatment: Check appropriate box. Check none if officer was evaluated and no treatment was required. Specifically, check "Treated at Scene" if officer was treated at scene by EMS for injuries. Check "Treated at Hospital" if officer was transported to hospital for treatment of injuries. Check "Hospitalized" if officer was admitted to the Hospital as a result of injuries.

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Mark Figure to Indicate Contact Points: When applicable, mark the areas on the figure where applied force contacted the subject's body.

Sergeant: Sign, list ARJIS number and date reviewed.

Lieutenant: Sign, list ARJIS number and date reviewed.

Captain: Sign, list ARJIS number and date reviewed.



San Diego County Sheriff's Department Officer Report

CAD Event No. **E4421100**Case No. **17147578**Report No. **66363****1**

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GENERAL CASE INFORMATION

Special Studies:		Related Cases:	
Location, City, State, ZIP: 451 Riverview Pkwy, Santee, CA 92071		Occurred On: 9/11/2017 3:50:00 PM (Monday)	
Jurisdiction: DETENTION FACILITY - LAS COLINAS WOMENS	Beat: 024	Call Source:	(and Between):

INDIVIDUAL/S

Name: Burrell, Kandriqua				Person Code:		Interpreter Language:			
ALIAS / AKA / NICKNAME / MONIKER:									
Name Type: Alias/AKA		First: Kavricia		Middle:		Last: McKoy		Suffix:	
Name Type: Alias/AKA		First: Kalani		Middle:		Last: Williams		Suffix:	
Home Address, City, State, ZIP:				Res. Country:		County Residence: N Nonresident		Undocumented:	
Race: B	Sex: F	Date of Birth / Age: (b)(5)(A) - 19	Height: 5' 6"	Weight: 130 lbs	Hair Color: BLK	Eye Color: BRO	Facial Hair: 12 - None/Fuzz	Complexion: DBR - Dark Brown	
Employment Status: U - Unemployed		Occupation/Grade:		Employer/School:		Employer Address, City, State, ZIP:			

**CONTACT INFORMATION
IDENTIFICATION:**

Type: DLN - Drivers License Number	Number: (b)(5)(A)	State:	Country:	
Type: CII - CII Number	Number: (b)(5)(C)	State:	Country:	
Type: FBI - FBI No.	Number: (b)(5)(C)	State:	Country:	
Type: BN - Booking Number	Number: 17116878	State:	Country:	
Type: JIM - JIMS Number	Number: (b)(5)(C)	State:	Country:	
Attire: Jail Issued Greens		Injury: Yes	Extent Of Treatment: 3 - Treated at Hospital	Violent Crime Circumstances:
Subject Injury Description:				
Officer Injury Description:				

REPORT NARRATIVE

Case #17147578
Event #E4421100

ORIGIN:

On 09/11/2017, I was assigned the Central Control Deputy position at the Las Colinas Detention and Re-Entry Facility (LCDRF). At approximately 1500 hours, I was assigned to the Tactical Team position of arrest and control (helmet #9) for the purpose of extracting inmate Kandriqua Burrell BN17116878 in the Women's Psychiatric Security Unit (Cell 22).

DEPUTY'S OBSERVATIONS AND ACTIONS:

The Tactical Team was briefed by Sgt. Hisquierdo (4644) that Burrell refused to allow the waist and leg chains to be removed. We were also briefed Burrell slid the waist chain off her body and was hitting the cell door with the chain threatening to fight anyone who entered her cell. Burrell flooded the cell floor with water.

The Tactical Team arrived outside of Burrell's assigned Cell #22 in the WPSU.

I heard Burrell yell, "Let's go open up!"

Reporting Officer SH3040 - PONCE, ALISON	Division / Organization LCDR / LCDR - Las Colinas Detention and Re-Entry Facility	Reviewed By SH1068 - POIRIER, ALMA
Report Date 9/12/2017 9:02:22 AM	Detective Assigned	Reviewed Date 9/19/2017 10:55:25 AM



San Diego County Sheriff's Department Officer Report

CAD Event No. **E4421100**

Case No. **17147578**

Report No. **66363**

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Once all tactical team members were in place and ready, Assistant Team Leader (ATL) Cpl. Santillanes (3160) signaled for the cell door to be released. The cell door was opened and Deputy Cazarez (2691) and Cpl. Ostberg (7590) gave Burrell verbal commands to get on her stomach.

I heard the firing of the less lethal weapons with commands by Deputy Cazarez and Cpl. Ostberg for Burrell to get on the ground.

Cpl. Ostberg informed the Tactical Team Burrell was lying on her side on the cell bed. The Tactical Team was given the command to enter the cell. I moved towards Burrell with the Tactical Team to place Burrell in the prone position on the cell floor.

I assisted the Tactical Team in lifting Burrell off the bed and placing her on the cell floor using both my hands to support her left shoulder. Once on the cell floor I saw Burrell lifting her head, using my left hand I applied downward pressure on Burrell's head to prevent her from biting or spitting on deputies.

I removed my hand from Burrell's head to unlock the waist chain so it could be secured around Burrell's waist. Burrell attempted to bite me several times and grabbed my hands. I punched Burrell approximately three times on the left side of her head and upper back while giving her verbal commands to stop biting and grabbing me. Burrell continued to violently thrash her head around, biting, and grabbing my hands while I was repositioning the waist chain. Burrell had her hands under her chest resisting the Tactical Teams efforts to place her hands near her stomach so the waist chain could be secured around her waist without slack in the chain.

Deputy Soria took ahold of the waist chain, using both my hands I grabbed Burrell's left forearm and forced it behind her back. Burrell grabbed my hands with her right hand squeezing tightly.

Once the waist chain was secured, I assisted the Tactical Team in removing Burrell from the cell using my right hand on her left shoulder and my left hand to control her head.

Burrell was placed in the prone position in the WPSU dayroom outside the cell. Burrell began biting at Deputy Joseif's hands. I placed a spit sock on Burrell's head.

I assisted in lifting Burrell onto a gurney using my hands to support her left shoulder.

Burrell was placed in the prone position on the gurney outside the cell.

Once secured on the gurney, Deputy Soria (3530) and I placed handcuffs on Burrell's wrists so the waist chain could be removed. Burrell resisted me by placing her left hand behind her back, using both my hands I forced Burrell's left hand behind her back so the handcuffs could be applied to her wrists. Two sets of handcuffs were used due to Burrell's resistance. Once the handcuffs were secured to Burrell's wrists, Deputy Soria and I double locked the handcuffs and removed the waist chain.

I used safety scissors to remove the jail issued nightgown and bra from Burrell's upper body.

Medical staff took Burrell's vitals and gave her medication. In order to prevent Burrell from grabbing the nurses I held Burrell's left hand.

After the medical process was completed by nurses it was determined Burrell would be transported to the hospital for further medical treatment. I assisted the Tactical Team in moving Burrell via gurney to Intake.

Deputy Soria and I secured Burrell's wrists in one pair of court holding handcuffs, double locked them and removed the two handcuffs from Burrell's wrists. Burrell did not resist.

Reporting Officer SH3040 - PONCE, ALISON	Division / Organization LCDR / LCDR - Las Colinas Detention and Re-Entry Facility	Reviewed By SH1068 - POIRIER, ALMA
Report Date 9/12/2017 9:02:22 AM	Detective Assigned	Reviewed Date 9/19/2017 10:55:25 AM



San Diego County Sheriff's Department Officer Report

CAD Event No. **E4421100**

Case No. **17147578**

Report No. **66363**

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Once the transporting vehicle was inside the Intake vehicle sallyport, I assisted the Tactical Team in moving Burrell via gurney to the car.

I assisted the Tactical Team in placing Burrell in the seated position on the gurney and escorting her to the seated position in the vehicle.

The car door was secured and I had no further contact with Burrell.

Reporting Officer SH3040 - PONCE, ALISON	Division / Organization LCDR / LCDR - Las Colinas Detention and Re-Entry Facility	Reviewed By SH1068 - POIRIER, ALMA
Report Date 9/12/2017 9:02:22 AM	Detective Assigned	Reviewed Date 9/19/2017 10:55:25 AM



San Diego County Sheriff's Department

Use of Force Supplemental

UFO DATE AND TIME 9/11/2017 15:50	EVENT NUMBER E4421100	CASE NUMBER 17147578	DOCUMENT NUMBER 66363	STATION/FACILITY LCDR - Las Colinas Detention and Re-Entry Facility
INCIDENT DESCRIPTION / OFFENSES Cell Extraction/ Burrell BN17116878				
SUBJECT'S NAME (LAST, FIRST, MI) Burrell, Kandriqua		DATE OF BIRTH (b)(5)(A)	ARRESTED <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	SUPERVISOR PRESENT <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
DATE/TIME SUPERVISOR NOTIFIED 09/11/2017 15:50				
REASON(S) FOR USING FORCE: <input type="checkbox"/> Necessary to effect an arrest <input type="checkbox"/> Necessary to prevent a violent forcible felony <input type="checkbox"/> Delaying Jail Operations <input checked="" type="checkbox"/> Necessary to defend self or another <input checked="" type="checkbox"/> Necessary to restrain for subject's safety <input checked="" type="checkbox"/> Necessary to prevent escape/evasion <input checked="" type="checkbox"/> Necessary during high-risk incident <input type="checkbox"/> Necessary to effect a lawful detention <input type="checkbox"/> Necessary during riot				
SUBJECT APPEARED TO BE <input type="checkbox"/> Under the influence of alcohol and/or drugs <input checked="" type="checkbox"/> Mentally impaired		NUMBER OF OFFICERS ON SCENE 13		NUMBER OF OFFICERS USING FORCE 1
LEVEL(S) OF RESISTANCE ENCOUNTERED <input type="checkbox"/> NONE (subject cooperated/complied) <input type="checkbox"/> PSYCHOLOGICAL INTIMIDATION (non-verbal cues indicating subject's attitude or physical readiness to resist) <input type="checkbox"/> VERBAL NON-COMPLIANCE (subject's expressed unwillingness to comply with the officer's commands) <input type="checkbox"/> PASSIVE RESISTANCE (represents by a refusal to respond to verbal commands but also offers no form of physical resistance) <input checked="" type="checkbox"/> ACTIVE RESISTANCE (pushing, pulling or running away from the officer to avoid control; not attempting to harm the officer) <input checked="" type="checkbox"/> ASSAULTIVE BEHAVIOR (physical actions of assault) <input checked="" type="checkbox"/> AGGRAVATED ACTIVE AGGRESSION (potential injury or death)				
LAW ENFORCEMENT TOOL/TECHNIQUE USED TO GAIN COMPLIANCE OR OVERCOME RESISTANCE (CHECK ALL THAT APPLY)				
<input checked="" type="checkbox"/> Verbal Commands: "Stop biting and grabbing me."				
<input checked="" type="checkbox"/> Empty Hand Control <input checked="" type="checkbox"/> Grab, Push, Pull, or Body Weight <input type="checkbox"/> Control Hold (Duration:) <input type="checkbox"/> Pressure Point (Duration:) (# of Contacts:) <input checked="" type="checkbox"/> Strike (Body part used: Head/ Back) (# of Contacts: 2) <input type="checkbox"/> Takedown Type: _____ <input type="checkbox"/> Carotid (Rendered Unconscious? <input type="checkbox"/> Yes <input type="checkbox"/> No) (Duration:)				
<input checked="" type="checkbox"/> Tool/Device/Weapon <input type="checkbox"/> OC Agent (Duration:) (# of Contacts:) <input type="checkbox"/> Decontaminated <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Cord Cuff Restraint Device (Duration:) <input type="checkbox"/> Impact Weapon (# of Contacts:) Type: _____ <input type="checkbox"/> Canine (Duration:) (# of Contacts:) <input type="checkbox"/> Vehicle/Forcible Stop <input type="checkbox"/> Weapon Pointed at Subject (Duration:) Type: _____ <input checked="" type="checkbox"/> Spit Sock (Duration: approximately 6 hours) <input type="checkbox"/> Pro-Strait Chair <input type="checkbox"/> Tactical Shield <input type="checkbox"/> WRAP				
<input type="checkbox"/> Less-Lethal Weapon System <input type="checkbox"/> PepperBall - OC Powder <input type="checkbox"/> PepperBall - Water <input type="checkbox"/> 37 mm Rifle - Standard <input type="checkbox"/> 37 mm Rifle - Low Energy <input type="checkbox"/> 40 mm Rifle - Bean Bag <input type="checkbox"/> 40 mm Rifle - Sponge <input type="checkbox"/> Taser - Probes <input type="checkbox"/> Taser - Drive Stuns <input type="checkbox"/> Stingball Grenade <input type="checkbox"/> Sound/Light device <input type="checkbox"/> 12-Gauge Super Sock <input type="checkbox"/> Ultron/NOVA Shield <input type="checkbox"/> REACT Belt				
<input type="checkbox"/> Firearm <input type="checkbox"/> Type: _____				
<input type="checkbox"/> Other: _____				
WAS INITIAL USE OF FORCE EFFECTIVE? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
WAS ADDITIONAL CONTROL OR FORCE NEEDED? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No				
SUBJECT INJURED <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		EXTENT OF TREATMENT <input type="checkbox"/> None <input checked="" type="checkbox"/> Treated at hospital <input type="checkbox"/> Treated at scene <input type="checkbox"/> Hospitalized <input type="checkbox"/> Refused treatment		
OFFICER(S) INJURED <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		EXTENT OF TREATMENT <input checked="" type="checkbox"/> None <input type="checkbox"/> Treated at hospital <input type="checkbox"/> Treated at scene <input type="checkbox"/> Hospitalized <input type="checkbox"/> Refused treatment		
SUBJECT INJURY DESCRIPTION		OFFICER INJURY DESCRIPTION		
OTHER FORCE USED/COMMENTS/EQUIPMENT PERFORMANCE: Cut off night gown and bra				
SERGEANT		ARJIS	DATE	
LIEUTENANT		ARJIS	DATE	
CAPTAIN		ARJIS	DATE	



San Diego County Sheriff's Department

Use of Force Supplemental

Use of Force Supplemental Instructions

Lines 1 & 3: Fill in the blanks.

Line 2: If the suspect was committing a crime and force was used to stop or apprehend the subject, document the appropriate penal code. If the UOF occurred in the performance of the officer's duties, document the incident description, i.e. officer transport, officer escort, making arrest, detaining suspect, cell extraction etc.

Primary Reason for Using Force: Check appropriate box(s).

Subject Appeared To Be: Check if applicable.

Number of Officers on Scene: List number of officers present.

Number of Officers Using Force: List number of officers that used force.

Level(s) of Resistance Encountered: Check appropriate box(s).

L.E. Tool/Technique Used: Check appropriate box(s). If known and/or applicable, include duration (approximate length of time) tool/technique was used. If known and/or applicable, include the number of contacts (approximate number of strikes, impacts, etc.) when requested on form.

Was Initial Use of Force Effective? If initial force used was effective, check "Yes." If initial force used was ineffective and additional force was necessary, check "No."

Was Additional Control or Force Needed: If initial force used was ineffective and additional force was necessary, check "Yes." If initial force used was effective, check "No."

Target Distance: If applicable (refers primarily to less lethal weapon systems), approximate distance or provide range (i.e. 7-15 feet, 15-20 yards, etc.) from subject during application of force.

Subject Injured: Check "Yes" if medically treated for injury sustained as a possible result of force applied by a officer(s) – does not include previous injuries suffered prior to officer contact. Check "No" if subject was not injured or simply complains of injury/pain suffered as a result of force applied by an officer(s) and refuses medical attention. Any complaints of pain shall be documented in the use of force report narrative (whenever any physical force used by a officer results in a complaint of injury or an injury that necessitates medical treatment of a subject, a supervisor will be notified immediately).

Extent of Treatment: Check appropriate box. Check none if subject was evaluated and no treatment was required. Specifically, check "Treated at Scene" if subject was treated at scene by EMS for injuries that may have resulted due to force applied by officer(s). Check "Treated at Hospital" if subject was transported to hospital for treatment of injuries that may have been sustained as an apparent result of force applied by officer(s). Check "Hospitalized" if subject was admitted to the Hospital as a result of injuries that were sustained as a result of force applied by officer(s).

Officer Injured: Check appropriate box (see above).

Extent of Treatment: Check appropriate box. Check none if officer was evaluated and no treatment was required. Specifically, check "Treated at Scene" if officer was treated at scene by EMS for injuries. Check "Treated at Hospital" if officer was transported to hospital for treatment of injuries. Check "Hospitalized" if officer was admitted to the Hospital as a result of injuries.

Other Force Used/Comments/Equipment Performance: This section can be used to document other force options not listed on the form; relevant comments about the incident such as complaints of pain/injury (room permitting) and negative/positive comments regarding equipment performance.

Mark Figure to Indicate Contact Points: When applicable, mark the areas on the figure where applied force contacted the subject's body.

Sergeant: Sign, list ARJIS number and date reviewed.

Lieutenant: Sign, list ARJIS number and date reviewed.

Captain: Sign, list ARJIS number and date reviewed.



San Diego County Sheriff's Department Officer Report

CAD Event No. **E4421100**Case No. **17147578**Report No. **66364****1**

Page 1 of 2

GENERAL CASE INFORMATION

Special Studies:		Related Cases:	
Location, City, State, ZIP: 451 Riverview Pkwy,		Occurred On: 9/11/2017 3:50:00 PM (Monday)	
Jurisdiction: DETENTION FACILITY - LAS COLINAS WOMENS	Beat: 024	Call Source:	(and Between):

INDIVIDUAL/S

Name: Burrell, Kandruigua				Person Code:		Interpreter Language: EN - English			
ALIAS / AKA / NICKNAME / MONIKER:									
Name Type: Alias/AKA		First: Kavricia		Middle:		Last: Mckoy		Suffix:	
Name Type: Alias/AKA		First: Kalani		Middle:		Last: Williams		Suffix:	
Home Address, City, State, ZIP:				Res. Country:		County Residence: N Nonresident		Undocumented: No	
Race: B	Sex: F	Date of Birth / Age: (b)(5)(A) - 19	Height: 5' 6"	Weight: 130 lbs	Hair Color: BRO	Eye Color: BRO	Facial Hair: 12 - None/Fuzz	Complexion: DBR - Dark Brown	
Employment Status: U - Unemployed		Occupation/Grade:		Employer/School:		Employer Address, City, State, ZIP:			
CONTACT INFORMATION								IDENTIFICATION:	
Attire: Jail Issued Greens				Injury: Yes		Extent Of Treatment: 3 - Treated at Hospital		Violent Crime Circumstances:	
Subject Injury Description:									
Officer Injury Description:									

REPORT NARRATIVECase #17147578
Event#E4421100**ORIGIN:**

On 09/11/2017, I was assigned to the Medical Observation Deputy Position at the Las Colinas Detention and Re-Entry Facility (LCDRF). At approximately 1500 hours, I was notified by Assistant Tactical Leader (ATL) Corporal Santillanes #3160 to respond to the tactical response room.

DEPUTY'S OBSERVATIONS AND ACTIONS:

Upon arrival inside the Tactical Response Room, Sergeant Hisquierdo #4644 informed the Tactical Team inmate Kandrigua Burrell BN-17116878 refused to allow deputies to remove the leg and waist chains. She had slipped the waist chains in front of her. Sgt. Hisquierdo briefed the tactical team we were assembling for the purpose of extracting, force medicating and moving Burrell to another cell. I was assigned as the shield on the tactical team, wearing helmet #10.

While suiting up in department approved tactical gear, the tactical team was informed by Cpl. Santillanes Burrell had begun flooding her cell, placing lotion on the floor and hitting the cell door with the waist chains. Once the tactical team was suited up in tactical gear, we were led by Cpl. Santillanes to Women's Psychiatric Unit (WPSU). The tactical team entered WPSU housing and staged outside Burrell's cell (22).

When the tactical team arrived, Burrell began to challenge deputies saying "Let's go, open up", and hit the cell door.

Once all members of the tactical team were in place, the cell door was opened and Deputy Cazarez #2691 began to give Burrell instructions. Burrell refused to comply with instructions and a less lethal weapon was deployed. Corporal Ostberg #7590 attempted to get Burrell onto the floor in the prone position, but again she refused to comply and another less lethal weapon was deployed.

Reporting Officer SH3530 - SORIA, CAROLINE	Division / Organization LCDR / Lcdr - Las Colinas Detention and Re-Entry Facility	Reviewed By SH1068 - POIRIER, ALMA
Report Date 9/12/2017 9:02:54 AM	Detective Assigned	Reviewed Date 9/19/2017 11:00:00 AM



San Diego County Sheriff's Department Officer Report

CAD Event No. **E4421100**

Case No. **17147578**

Report No. **66364**

2

Page 2 of 2

After less lethal weapons were deployed, Cpl. Ostberg informed the tactical team of Burrell's position in the cell, then the tactical team made entry into the cell. Utilizing the NOVA Shield, I made initial contact with the left side of Burrell's body and pinned her against the bed. The shield was not activated. Deputies Ponce #3040 and Joseif #9011 attempted to gain control of Burrell's upper body, but Burrell continued to struggle with them (See Deputies Ponce and Joseif report for further details). Due to the tight quarters surrounding the bed, the decision was made to place Burrell on the cell floor in order to gain control. I removed the shield and assisted deputies by grabbing the waistband of Burrell's pants. Using my left hand, I lifted her up and placed her on the floor.

Deputies Ponce and Joseif attempted to get Burrell's hands behind her back, but Burrell continued to pull away and thrash her body. I struck Burrell's outer left thigh with my right knee and gave her instruction to give up her hands. Burrell continued to resist deputies. With a closed fist, I struck the back of Burrell's left thigh with my right hand and gave Burrell instruction to stop resisting. Burrell began to comply with instruction and then again continued to resist.

Deputy Ponce was able to unlock the waist chain and get Burrell's left hand behind her back. Deputy Ponce handed me the lock to the waist chains and this gave me the opportunity to retighten and apply the chain. Once Burrell was waist chained, deputies removed Burrell from the cell and placed her on the gurney in order for her to be medically evaluated and medicated.

Burrell was secured to the gurney but still had her right arm under her body. Using both my hands, I grabbed Burrell's right forearm and forced it behind her back. Two sets of handcuffs were used due to Burrell's resistance. Once the handcuffs were secured to Burrell's wrists, Deputy Ponce and I double locked the handcuffs and removed the waist chain.

I assisted deputies in removing Burrell's jail issued night gown and bra from her upper body by using my right hand to pull the cut clothing out from underneath her body. Medical staff took Burrell's vitals and gave her medication. In order to prevent Burrell from grabbing the nurses, I held Burrell's right hand. After the medical process was completed by nurses, it was determined Burrell would be transported to the hospital for further medical treatment. I assisted the tactical team in escorting Burrell to Intake via the gurney.

Deputy Ponce and I secured Burrell's wrists in one pair of court holding handcuffs, double locked them and removed the two handcuffs from Burrell's wrists. Burrell did not resist.

Once the transporting vehicle was inside the Intake vehicle sally port, I assisted the tactical team in moving Burrell via the gurney to the car. I assisted the tactical team in placing Burrell in the seated position on the gurney by placing my left hand on her right shoulder and my right hand on her right hip and sat her up. The car door was secured and I had no further contact with Burrell.

Reporting Officer SH3530 - SORIA, CAROLINE	Division / Organization LCDR / LCDR - Las Colinas Detention and Re-Entry Facility	Reviewed By SH1068 - POIRIER, ALMA
Report Date 9/12/2017 9:02:54 AM	Detective Assigned	Reviewed Date 9/19/2017 11:00:00 AM



San Diego County Sheriff's Department

Use of Force Supplemental

UFO DATE AND TIME 9/11/2017 15:50	EVENT NUMBER E4421100	CASE NUMBER 17147578	DOCUMENT NUMBER 66364	STATION/FACILITY LCDR - Las Colinas Detention and Re-Entry Facility						
INCIDENT DESCRIPTION / OFFENSES Cell Extraction/ Burrell BN 17116878										
SUBJECT'S NAME (LAST, FIRST, MI) Burrell, Kandruigua		DATE OF BIRTH (b)(5)(A)	ARRESTED <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	SUPERVISOR PRESENT <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No						
DATE/TIME SUPERVISOR NOTIFIED 09/11/2017 15:50										
REASON(S) FOR USING FORCE: <input type="checkbox"/> Necessary to effect an arrest <input type="checkbox"/> Necessary to prevent a violent forcible felony <input type="checkbox"/> Delaying Jail Operations <input checked="" type="checkbox"/> Necessary to defend self or another <input checked="" type="checkbox"/> Necessary to restrain for subject's safety <input checked="" type="checkbox"/> Necessary to prevent escape/evasion <input checked="" type="checkbox"/> Necessary during high-risk incident <input type="checkbox"/> Necessary to effect a lawful detention <input type="checkbox"/> Necessary during riot										
SUBJECT APPEARED TO BE <input type="checkbox"/> Under the influence of alcohol and/or drugs <input checked="" type="checkbox"/> Mentally impaired		NUMBER OF OFFICERS ON SCENE 13		NUMBER OF OFFICERS USING FORCE 1						
LEVEL(S) OF RESISTANCE ENCOUNTERED <input type="checkbox"/> NONE (subject cooperated/complied) <input type="checkbox"/> PSYCHOLOGICAL INTIMIDATION (non-verbal cues indicating subject's attitude or physical readiness to resist) <input type="checkbox"/> VERBAL NON-COMPLIANCE (subject's expressed unwillingness to comply with the officer's commands) <input type="checkbox"/> PASSIVE RESISTANCE (represents by a refusal to respond to verbal commands but also offers no form of physical resistance) <input checked="" type="checkbox"/> ACTIVE RESISTANCE (pushing, pulling or running away from the officer to avoid control; not attempting to harm the officer) <input checked="" type="checkbox"/> ASSAULTIVE BEHAVIOR (physical actions of assault) <input checked="" type="checkbox"/> AGGRAVATED ACTIVE AGGRESSION (potential injury or death)										
LAW ENFORCEMENT TOOL/TECHNIQUE USED TO GAIN COMPLIANCE OR OVERCOME RESISTANCE (CHECK ALL THAT APPLY)										
<input checked="" type="checkbox"/> Verbal Commands: "Give up your Hands", "Stop resisting".										
<input checked="" type="checkbox"/> Empty Hand Control <input checked="" type="checkbox"/> Grab, Push, Pull, or Body Weight <input type="checkbox"/> Control Hold (Duration:) <input type="checkbox"/> Pressure Point (Duration:) (# of Contacts:) <input checked="" type="checkbox"/> Strike (Body part used: Right Knee Struck Left Thigh, Closed Right <input type="checkbox"/> Takedown Type: _____ <input type="checkbox"/> Carotid (Rendered Unconscious? <input type="checkbox"/> Yes <input type="checkbox"/> No) (Duration:)										
<input type="checkbox"/> Tool/Device/Weapon <input type="checkbox"/> OC Agent (Duration:) (# of Contacts:) <input type="checkbox"/> Decontaminated <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Cord Cuff Restraint Device (Duration:) <input type="checkbox"/> Impact Weapon (# of Contacts:) Type: _____ <input type="checkbox"/> Canine (Duration:) (# of Contacts:) <input type="checkbox"/> Vehicle/Forcible Stop <input type="checkbox"/> Weapon Pointed at Subject (Duration:) Type: _____ <input type="checkbox"/> Spit Sock (Duration:) <input type="checkbox"/> Pro-Strait Chair <input type="checkbox"/> Tactical Shield <input type="checkbox"/> WRAP										
<input checked="" type="checkbox"/> Less-Lethal Weapon System <input type="checkbox"/> PepperBall - OC Powder <input type="checkbox"/> PepperBall - Water <input type="checkbox"/> 37 mm Rifle - Standard <input type="checkbox"/> 37 mm Rifle - Low Energy <input type="checkbox"/> 40 mm Rifle - Bean Bag <input type="checkbox"/> 40 mm Rifle - Sponge <input type="checkbox"/> Taser - Probes <input type="checkbox"/> Taser - Drive Stuns <input type="checkbox"/> Stingball Grenade <input type="checkbox"/> Sound/Light device <input type="checkbox"/> 12-Gauge Super Sock <input checked="" type="checkbox"/> Ultron/NOVA Shield <input type="checkbox"/> REACT Belt										
<input type="checkbox"/> Firearm <input type="checkbox"/> Type: _____										
<input type="checkbox"/> Other: _____										
<table border="1"><thead><tr><th>Discharges</th><th>Number of</th><th>Target</th></tr></thead><tbody><tr><td>0</td><td>1</td><td></td></tr></tbody></table>					Discharges	Number of	Target	0	1	
Discharges	Number of	Target								
0	1									
WAS INITIAL USE OF FORCE EFFECTIVE? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No										
WAS ADDITIONAL CONTROL OR FORCE NEEDED? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No										
SUBJECT INJURED <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		EXTENT OF TREATMENT <input type="checkbox"/> None <input checked="" type="checkbox"/> Treated at hospital <input type="checkbox"/> Treated at scene <input type="checkbox"/> Hospitalized <input type="checkbox"/> Refused treatment								
SUBJECT INJURY DESCRIPTION		OFFICER INJURY DESCRIPTION								
OTHER FORCE USED/COMMENTS/EQUIPMENT PERFORMANCE: NOVA Shield was not activated at any time during the incident. Shield made contact with Burrell's body- Placed onto her left side, pinning her to bed. Deputy Soria #3530.										
SERGEANT		ARJIS	DATE							
LIEUTENANT		ARJIS	DATE							
CAPTAIN		ARJIS	DATE							



San Diego County Sheriff's Department

Use of Force Supplemental

Use of Force Supplemental Instructions

Lines 1 & 3: Fill in the blanks.

Line 2: If the suspect was committing a crime and force was used to stop or apprehend the subject, document the appropriate penal code. If the UOF occurred in the performance of the officer's duties, document the incident description, i.e. officer transport, officer escort, making arrest, detaining suspect, cell extraction etc.

Primary Reason for Using Force: Check appropriate box(s).

Subject Appeared To Be: Check if applicable.

Number of Officers on Scene: List number of officers present.

Number of Officers Using Force: List number of officers that used force.

Level(s) of Resistance Encountered: Check appropriate box(s).

L.E. Tool/Technique Used: Check appropriate box(s). If known and/or applicable, include duration (approximate length of time) tool/technique was used. If known and/or applicable, include the number of contacts (approximate number of strikes, impacts, etc.) when requested on form.

Was Initial Use of Force Effective? If initial force used was effective, check "Yes." If initial force used was ineffective and additional force was necessary, check "No."

Was Additional Control or Force Needed: If initial force used was ineffective and additional force was necessary, check "Yes." If initial force used was effective, check "No."

Target Distance: If applicable (refers primarily to less lethal weapon systems), approximate distance or provide range (i.e. 7-15 feet, 15-20 yards, etc.) from subject during application of force.

Subject Injured: Check "Yes" if medically treated for injury sustained as a possible result of force applied by a officer(s) – does not include previous injuries suffered prior to officer contact. Check "No" if subject was not injured or simply complains of injury/pain suffered as a result of force applied by an officer(s) and refuses medical attention. Any complaints of pain shall be documented in the use of force report narrative (whenever any physical force used by a officer results in a complaint of injury or an injury that necessitates medical treatment of a subject, a supervisor will be notified immediately).

Extent of Treatment: Check appropriate box. Check none if subject was evaluated and no treatment was required. Specifically, check "Treated at Scene" if subject was treated at scene by EMS for injuries that may have resulted due to force applied by officer(s). Check "Treated at Hospital" if subject was transported to hospital for treatment of injuries that may have been sustained as an apparent result of force applied by officer(s). Check "Hospitalized" if subject was admitted to the Hospital as a result of injuries that were sustained as a result of force applied by officer(s).

Officer Injured: Check appropriate box (see above).

Extent of Treatment: Check appropriate box. Check none if officer was evaluated and no treatment was required. Specifically, check "Treated at Scene" if officer was treated at scene by EMS for injuries. Check "Treated at Hospital" if officer was transported to hospital for treatment of injuries. Check "Hospitalized" if officer was admitted to the Hospital as a result of injuries.

Other Force Used/Comments/Equipment Performance: This section can be used to document other force options not listed on the form; relevant comments about the incident such as complaints of pain/injury (room permitting) and negative/positive comments regarding equipment performance.

Mark Figure to Indicate Contact Points: When applicable, mark the areas on the figure where applied force contacted the subject's body.

Sergeant: Sign, list ARJIS number and date reviewed.

Lieutenant: Sign, list ARJIS number and date reviewed.

Captain: Sign, list ARJIS number and date reviewed.



San Diego County Sheriff's Department Evidence Report

Case No: **17147578**Evidence Sheet No: **001****1**

Page 1 of 2

GENERAL CASE INFORMATION

REPORTING AGENCY: SH - Sheriff				
CALL FOR SERVICE NUMBER (CAD) E4421100	OFFENSE TYPE: 981153 - ZZ - MISCELLANEOUS REPORTS - 153	DIVISION: LCDR - Las Colinas Detention and Re-Entry Facility	BILLING CODE: SDSO - SD Sheriff's Office	SEARCH WARRANT NUMBER:
DATE OF INCIDENT: 9/11/2017	INCIDENT LOCATION (CITY, STATE, ZIP): 451 RIVERVIEW PKWY. SANTEE CA 92071			KEY CASE NUMBER:
REPORTING OFFICER: SH2691 - CAZAREZ, RAMON		ID: SH2691	DIVISION: Las Colinas Detention and Re-Entry Facility	
ASSIGNED DETECTIVE: SH2691 - CAZAREZ, RAMON		ID: SH2691	DIVISION: Las Colinas Detention and Re-Entry Facility	

OUTSIDE AGENCY

OA CASE NUMBER:	AGENCY NAME:	ASSIGNED DETECTIVE:	CONTACT PHONE
AGENCY ADDRESS (CITY, STATE, ZIP):			

INVOLVED PEOPLE**EVIDENCE INFORMATION SECTION**

FIN 1.1	OA Item/TAG #	PROPERTY DESCRIPTION: DVD MASTER COPY (DVD CONTAINING VIDEO FROM HANDHEL		 * I 1 8 8 7 4 6 6 *	
VALUE:	QUANTITY: 1	MAKE / MANUFACTURER:	MODEL:		
CALIBER:	SERIAL NUMBER:	PROPERTY TYPE: 1306 - Recording - non Interview - Music/Video/Photo CD, DVD, Tape, Film, Digital storage, Negative			
PROPERTY STATUS: ES - Evidence (Seized)		SEARCH WARRANT:			
PROPERTY DISPOSITION: Stored		DATE/TIME RECVRD / SEIZED: 9/11/2017			
DRUG TYPE:		DRUG QUANTITY:		CSI	PFIN
DRUG MEASURE:					
NOTES:					


FIN 1.2	OA Item/TAG #	PROPERTY DESCRIPTION: DVD MASTER COPY (DVD CONTAINING VIDEO FROM HANDHEL		 * I 1 8 8 7 4 6 7 *	
VALUE:	QUANTITY: 1	MAKE / MANUFACTURER:	MODEL:		
CALIBER:	SERIAL NUMBER:	PROPERTY TYPE: 1306 - Recording - non Interview - Music/Video/Photo CD, DVD, Tape, Film, Digital storage, Negative			
PROPERTY STATUS: ES - Evidence (Seized)		SEARCH WARRANT:			
PROPERTY DISPOSITION: Stored		DATE/TIME RECVRD / SEIZED: 9/11/2017			
DRUG TYPE:		DRUG QUANTITY:		CSI	PFIN
DRUG MEASURE:					
NOTES:					




San Diego County Sheriff's Department Evidence Report

Case No: **17147578****2**Evidence Sheet No: **001**

Page 2 of 2

FIN 1.3	OA Item/TAG #	PROPERTY DESCRIPTION: DVD MASTER COPY (DVD CONTAINING FACILITY VIDEO)		 * I 1 8 8 7 4 6 8 *
VALUE:	QUANTITY: 1	MAKE / MANUFACTURER:	MODEL:	
CALIBER:	SERIAL NUMBER:	PROPERTY TYPE: 1306 - Recording - non Interview - Music/Video/Photo CD, DVD, Tape, Film, Digital storage, Negative		
PROPERTY STATUS: ES - Evidence (Seized)		SEARCH WARRANT:		
PROPERTY DISPOSITION: Stored		DATE/TIME RECVRD / SEIZED: 9/11/2017	CSI	
DRUG TYPE:		DRUG QUANTITY:		DRUG MEASURE:
NOTES:				

FIN 1.4	OA Item/TAG #	PROPERTY DESCRIPTION: CD-R MASTER COPY (CD CONTAINING 4 DIGITAL PHOTOS)		 * I 1 8 8 7 4 6 9 *
VALUE:	QUANTITY: 1	MAKE / MANUFACTURER:	MODEL:	
CALIBER:	SERIAL NUMBER:	PROPERTY TYPE: 1311 - Recording - Interview or Case related - Video/Photo CD, DVD, Tape, Film, Digital storage, Negative		
PROPERTY STATUS: ES - Evidence (Seized)		SEARCH WARRANT:		
PROPERTY DISPOSITION: Stored		DATE/TIME RECVRD / SEIZED: 9/11/2017	CSI	
DRUG TYPE:		DRUG QUANTITY:		DRUG MEASURE:
NOTES:				

**TASER Information**

Serial X30001184
Model TASER X2
Firmware Version Rev. 04.030
Application Version 3.15.57
Health Good

Offline Report

Local Timezone
Generated On

Pacific Daylight Time (UTC -07:00)
11 Sep 2017 17:42:05

Dates from : Mon Sep 11 05:00:00 2017 to : Mon Sep 11 17:00:00 2017

Device (X2)

Seq #	Local Time [DD:MM:YYYY hh:mm:ss]	Event [Event Type]	Cartridge Info [Bay: length in feet/status]	Duration [Seconds]	Temp [Degrees Celsius]	Batt Remaining [%]
764	11 Sep 2017 15:37:02	Armed	C1: 25' Standard C2: 25' Standard		31	53
765	11 Sep 2017 15:37:09	Safe	C1: 25' Standard C2: 25' Standard	7	30	53
766	11 Sep 2017 15:38:08	Armed	C1: 25' Standard C2: 25' Standard		32	53
767	11 Sep 2017 15:38:17	Safe	C1: 25' Standard C2: 25' Standard	9	32	53
768	11 Sep 2017 15:48:46	Armed	C1: 25' Standard C2: 25' Standard		31	53
769	11 Sep 2017 15:50:40	Safe	C1: 25' Standard C2: 25' Standard	114	37	52
770	11 Sep 2017 15:51:56	Armed	C1: 25' Standard C2: 25' Standard		34	52
771	11 Sep 2017 15:52:30	Arc	C1: 25' Standard C2: 25' Standard	3		52
772	11 Sep 2017 15:55:58	Arc	C1: 25' Standard C2: 25' Standard	2		52
773	11 Sep 2017 15:59:56	Safe	C1: 25' Standard C2: 25' Standard	480	43	50
774	11 Sep 2017 16:30:54	Armed	C1: 25' Standard C2: 25' Standard		28	50
775	11 Sep 2017 16:34:19	Safe	C1: 25' Standard C2: 25' Standard	205	38	49